

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000064648

**Entity Name:** URBAN CABANA INC

**Current Principal Place of Business:**

2821 SE POCATELLO RD  
PORT ST LUCIE, FL 34952

**Current Mailing Address:**

2821 SE POCATELLO RD  
PORT ST LUCIE, FL 34952 US

**FEI Number:** 46-3387613

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

HOWES, MEAGHAN  
2821 SE POCATELLO RD  
PORT ST LUCIE, FL 34952 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title P  
Name HOWES, MEAGHAN  
Address 2821 SE POCATELLO RD  
City-State-Zip: PORT ST LUCIE FL 34952

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MEAGHAN HOWES

**OWNER**

**06/07/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date