

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000066884

**Entity Name:** KATHLEEN BARREAU, PA

**Current Principal Place of Business:**

1591 NE MIAMI GARDENS DRIVE  
113  
MIAMI, FL 33179

**Current Mailing Address:**

PO BOX 601472  
MIAMI, FL 33160 US

**FEI Number:** 46-3417206

**Certificate of Status Desired:** No

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

BARREAU, KATHLEEN  
1591 NE MIAMI GARDENS DRIVE  
113  
MIAMI, FL 33179 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            D  
Name            BARREAU, KATHLEEN  
Address        1591 NE MIAMI GARDENS DRIVE #113  
  
City-State-Zip: MIAMI FL 33179

*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:** KATHLEEN BARREAU

**DIRECTOR**

**04/24/2017**

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

\_\_\_\_\_  
Date