## 2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000078513

Entity Name: MCCIARCIA, INC.

Feb 06, 2014 **Secretary of State** CC3981520589

**FILED** 

## **Current Principal Place of Business:**

5930 NW 99TH AVE.

UNIT #4

DORAL, FL 33178

## **Current Mailing Address:**

5930 NW 99TH AVE.

UNIT#4

DORAL, FL 33178

FEI Number: 80-0952426 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

DIAZ FUENTES, OSMANIA 5930 NW 99TH AVE. UNIT #4 DORAL, FL 33178 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:

Name

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title Title SD

Name CIARCIA, CARLO Name SCIARRETTA DE CIARCIA, ADELINA

5930 NW 99TH AVE. UNIT #4 5930 NW 99TH AVE. Address Address

UNIT #4 City-State-Zip: DORAL FL 33178

City-State-Zip: DORAL FL 33178

PD

Title **VPD** 

Title TD CIARCIA, RAFAEL

Name CIARCIA, MARIA LUISA 5930 NW 99TH AVE. Address

Address 5930 NW 99TH AVE. UNIT #4

UNIT #4 DORAL FL 33178

City-State-Zip: City-State-Zip: DORAL FL 33178

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.