

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000088340

**Entity Name:** GARCIA, MIRANDA & GONZALEZ-RUA, P.A.

**Current Principal Place of Business:**

450 N. PARK RD  
SUITE 300  
HOLLYWOOD, FL 33021

**FILED**  
**Apr 05, 2019**  
**Secretary of State**  
**7718851908CC**

**Current Mailing Address:**

450 N. PARK RD  
SUITE 300  
HOLLYWOOD, FL 33021 US

**FEI Number: 46-4275901**

**Certificate of Status Desired: No**

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

GARCIA, CALLAN  
450 N. PARK RD.  
SUITE 300  
HOLLYWOOD, FL 33021 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	Title	VP
Name	GARCIA, CALLAN	Name	MIRANDA, PEDRO
Address	450 N. PARK RD. SUITE 300	Address	450 N. PARK RD SUITE 300
City-State-Zip:	HOLLYWOOD FL 33021	City-State-Zip:	HOLLYWOOD FL 33021
Title	V		
Name	GONZALEZ-RUA, ANDONI		
Address	9485 SW 72ND STREET SUITE A-270		
City-State-Zip:	MIAMI FL 33173		

*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: CALLAN GARCIA**

**PRESIDENT**

**04/05/2019**

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

\_\_\_\_\_  
Date