## 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000001502

Entity Name: FLORIDA CENTER FOR AUTISM, INC.

**Current Principal Place of Business:** 

11265 SW 88 STREET, SUITE H-216

MIAMI, FL 33176

## **Current Mailing Address:**

11265 SW 88 STREET, SUITE H-216 MIAMI, FL 33176

FEI Number: 47-2659233 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

ARAUZ, KRISTEL 11265 SW 88 STREET, SUITE H-216 MIAMI, FL 33176 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

FILED Feb 08, 2016

**Secretary of State** 

CC6707161286

## Officer/Director Detail:

Title F

Name ARAUZ, KRISTEL

Address 11265 SW 88 STREET, SUITE H-216

City-State-Zip: MIAMI FL 33176

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: KRISTEL ARAUZ