

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000038456

Entity Name: CLAUDIA LICON PA

Current Principal Place of Business:

3530 MYSTIC POINTE DR
209
AVENTURA, FL 33180

Current Mailing Address:

3530 MYSTIC POINTE DR
209
AVENTURA, FL 33180 US

FEI Number: 47-3882954

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LICON, CLAUDIA
3530 MYSTIC POINTE DR
209
AVENTURA, FL 33180 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: CLAUDIA LICON

04/04/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DPS
Name LICON, CLAUDIA
Address 3530 MYSTIC POINTE DR APT 209
City-State-Zip: AVENTURA FL 33180

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: CLAUDIA LICON

MANAGER

04/04/2019

Electronic Signature of Signing Officer/Director Detail

Date