## 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000059418

Entity Name: PERFORMANCE DENT REMOVAL CORP.

**Current Principal Place of Business:** 

930 W. MICHIGAN STREET ORLANDO. FL 32805

**Current Mailing Address:** 

15143 PIPING PLOVER STREET WINTER GARDEN. FL 34787 US

FEI Number: 37-1788008 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DE SOUZA SILVA ALVES, LEANDRO 930 W. MICHIGAN STREET ORLANDO, FL 32805 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: LEANDRO DE SOUZA SILVA ALVES 01/16/2019

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title P Title VP

Name DE SOUZA SILVA ALVES, LEANDRO Name ALVES, LEO

Address 11560 CITRA CIRCLE Address 930 W. MICHIGAN STREET

APT 103 City-State-Zip: ORLANDO FL 32805

City-State-Zip: WINDERMERE FL 34786

Title DIRECTOR

Name ALVES, JANIANA X MENDES
Address 930 W. MICHIGAN STREET

City-State-Zip: ORLANDO FL 32805

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: LEANDRO DE SOUZA SILVA ALVES

**PRESIDENT** 

01/16/2019

FILED Jan 16, 2019

**Secretary of State** 

0634581326CC

Electronic Signature of Signing Officer/Director Detail

Date