

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000064359

**Entity Name:** HILARY NORIEGA INC.

**Current Principal Place of Business:**

3519 PARKWAY BLVD  
LAND O LAKES, FL 34639

**Current Mailing Address:**

3519 PARKWAY BLVD  
LAND O LAKES, FL 34639 US

**FEI Number: 81-3429828**

**Certificate of Status Desired: No**

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

NORIEGA, HILARY  
3519 PARKWAY BLVD  
LAND O LAKES, FL 34639 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  
Name            NORIEGA, HILARY D  
Address        3519 PARKWAY BLVD  
City-State-Zip: LAND O LAKES FL 34639

*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: HILARY D NORIEGA**

**OWNER**

**01/16/2017**

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

\_\_\_\_\_ Date