

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17000044093

Entity Name: CONCHO BOLO, INC.**Current Principal Place of Business:**203 ARRICOLA AVE.
ST. AUGUSTINE, FL 32080**Current Mailing Address:**203 ARRICOLA AVE.
ST. AUGUSTINE, FL 32080 US**FEI Number: 82-1544540****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BROOKS, RICHARD
320 HIGH TIDE DR.
101
ST. AUGUSTINE, FL 32080 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	REEP, BEN
Address	203 ARRICOLA AVE
City-State-Zip:	ST. AUGUSTINE FL 32080

Title	VP
Name	REEP, BEN
Address	203 ARRICOLA AVE
City-State-Zip:	ST. AUGUSTINE FL 32080

Title	T
Name	REEP, BEN
Address	203 ARRICOLA AVE
City-State-Zip:	ST. AUGUSTINE FL 32080

Title	S
Name	REEP, BEN
Address	203 ARRICOLA AVE
City-State-Zip:	ST. AUGUSTINE FL 32080

Title	B
Name	REEP, BEN
Address	203 ARRICOLA AVE
City-State-Zip:	ST. AUGUSTINE FL 32080

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: BEN REEP**PRESIDENT****03/06/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date