

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17000062336

Entity Name: STRONG SHIELD JF SERVICES INC.**Current Principal Place of Business:**1865 SW DAVIS ST
PORT SAINT LUCIE, FL 34953**Current Mailing Address:**1865 SW DAVIS ST
PORT SAINT LUCIE, FL 34953 US**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**JULIATTO, JOHNY
778 SW MUNJACK CIRCLE
PORT SAINT LUCIE, FL 34986 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	JULIATTO, JOHNY
Address	778 SW MUNJACK CIRCLE
City-State-Zip:	PORT SAINT LUCIE FL 34986

Title	VP
Name	GALAGAN, LUIZ FABIANO
Address	1943 SW BEARD ST
City-State-Zip:	PORT SAINT LUCIE FL 34953

Title	VP
Name	JULIATTO, FABIANA
Address	778 SW MUNJACK CIRCLE
City-State-Zip:	PORT SAINT LUCIE FL 34986

Title	VP
Name	GALAGAN, ANALIZ
Address	1943 SW BEARD ST
City-State-Zip:	PORT SAINT LUCIE FL 34953

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: JOHNY JULIATTO

JRJ

04/02/2019

Electronic Signature of Signing Officer/Director Detail_____
Date