

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P18000036909

**Entity Name:** CLAUDIA WESTERMAYR, P.A.

**Current Principal Place of Business:**

743 NW 9TH AVE  
MIAMI, FL 33136

**Current Mailing Address:**

743 NW 9TH AVE  
MIAMI, FL 33136 US

**FEI Number: 82-5353043**

**Certificate of Status Desired:** No

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

CLAUDIA CHRISTINE WESTERMAYR  
743 NW 9TH AVE  
MIAMI, FL 33136 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            PRES  
Name            CLAUDIA CHRISTINE WESTERMAYR  
Address        743 NW 9TH AVE  
City-State-Zip: MIAMI FL 33136

*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 CHRISTINE WESTERMAYR

**PRESIDENT**

**04/25/2024**

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

\_\_\_\_\_  
Date