

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P18000090334

**Entity Name:** NICKES DESHOMMES INC.

**Current Principal Place of Business:**

5115 MONZA CT  
AVE MARIA, FL 34142

**Current Mailing Address:**

5115 MONZA CT  
AVE MARIA, FL 34142

**FEI Number:** 83-2444979

**Certificate of Status Desired:** No

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

DESHOMMES, NICKES  
5115 MONZA CT  
AVE MARIA, FL 34142 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 DESHOMMES, NICKES N  
Address 5115 MONZA CT  
City-State-Zip: AVE MARIA FL 34142

*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:** NICKESDESHOMMES

OWNER

04/08/2019

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

\_\_\_\_\_ Date