

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P19000072811

**Entity Name:** WATER & MOLD INSURANCE RESTORATION INC.

**Current Principal Place of Business:**

5830 NW 77 TERR  
PARKLAND, FL 33067

**Current Mailing Address:**

5830 NW 77 TERR  
PARKLAND, FL 33067

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

ARGOV, COLLEEN  
5830 NW 77 TERR  
PARKLAND, FL 33067 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 ARGOV, COLLEEN  
Address 5830 NW 77TH  
City-State-Zip: PARKLAND FL 33067

*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:** COLLEEN ARGOV

**PRESIDENT**

**06/18/2020**

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

\_\_\_\_\_  
Date