

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P20000048897

**Entity Name:** FUENTES INSURANCE ADJUSTING INC

**Current Principal Place of Business:**

2482 50TH AVE NE  
NAPLES, FL 34120

**Current Mailing Address:**

2482 50TH AVE NE  
NAPLES, FL 34120 US

**FEI Number: 85-1796600**

**Certificate of Status Desired: No**

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

FUENTES, JOHN A  
2482 50TH AVE NE  
NAPLES, FL 34120 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 FUENTES, JOHN A  
Address 2482 50TH AVE NE  
City-State-Zip: NAPLES FL 34120

*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: JOHN AARON FUENTES**

**OWNER**

**02/05/2021**

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

\_\_\_\_\_  
Date