

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P20000050390

**Entity Name:** M DELGADO ESPINOSA CORP

**Current Principal Place of Business:**

4963 PINE CONE LN  
WEST PALM BEACH, FL 33417

**Current Mailing Address:**

4963 PINE CONE LN  
WEST PALM BEACH, FL 33417 US

**FEI Number:** 85-1714795

**Certificate of Status Desired:** No

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

DELGADO ESPINOSA, MILAIDY  
4963 PINE CONE LN  
WEST PALM BEACH, FL 33417 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 DELGADO ESPINOSA, MILAIDY DDS  
Address 4963 PINE CONE LN  
City-State-Zip: WEST PALM BEACH FL 33417

*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:** MILAIDY DELGADO ESPINOSA

**PRESIDENT**

**01/28/2021**

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

\_\_\_\_\_  
Date