

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P21000060351

**Entity Name:** CORALPA INC

**Current Principal Place of Business:**

1600 NE 1ST AVE  
3519  
MIAMI, FL 33132

**FILED**  
**Feb 18, 2024**  
**Secretary of State**  
**1208629331CC**

**Current Mailing Address:**

1600 NE 1ST AVE  
3519  
MIAMI, FL 33132 US

**FEI Number: 87-1469820**

**Certificate of Status Desired: No**

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

CORAL PAVA, PAULA A  
1600 NE 1ST AVE  
3519  
MIAMI, FL 33132 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 CORAL PAVA, PAULA A  
Address 1600 NE 1ST AVE APT 3519  
City-State-Zip: MIAMI FL 33132

Title VP  
Name PAVA DE CORAL, AMANCIA I  
Address 1600 NE 1ST AVE APT 3519  
City-State-Zip: MIAMI FL 33132

Title TREA  
Name CORAL LUCERO, JUAN C  
Address 1600 NE 1ST AVE APT 3519  
City-State-Zip: MIAMI FL 33132

Title SEC  
Name CORAL PAVA, JUAN C  
Address 1600 NE 1ST AVE APT 3519  
City-State-Zip: MIAMI FL 33132

*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: JUAN CARLOS CORAL LUCERO**

**MR**

**02/18/2024**

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

\_\_\_\_\_  
Date