

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P22000024264

**Entity Name:** ANGELES ABA CORP.

**Current Principal Place of Business:**

5077 NW 7 ST APT 1414  
MIAMI, FL 33126

**Current Mailing Address:**

5077 NW 7 ST APT 1414  
MIAMI, FL 33126 US

**FEI Number:** 88-1625044

**Certificate of Status Desired:** No

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

DIAZ MOURE, ILIA  
5077 NW 7 ST APT 1414  
MIAMI, FL 33126 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 DIAZ MOURE, ILIA  
Address 5077 NW 7 ST APT 1414  
City-State-Zip: MIAMI FL 33126

*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:** ILIA DIAZ MOURE

P

04/30/2024

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

\_\_\_\_\_  
Date