# 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: LOREE SCHWARTZ

Electronic Signature of Signing Officer/Director Detail

2018	PROFIT	CORPOR	ATION ANNUAL	REPORT
2010				

DOCUMENT# P95000071215

Entity Name: FLORIDA CONFLICT RESOLUTION GROUP, INC.

## Current Principal Place of Business:

7685 SW 104 STREET SUITE 200 MIAMI, FL 33156

#### **Current Mailing Address:**

P O BOX 566761 MIAMI, FL 33256 US

### FEI Number: 65-0613082

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

SCHWARTZ , LOREE 7685 SW 104 STREET SUITE 200 MIAMI, FL 33156 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: LOREE RENE SCHWARTZ

Electronic Signature of Registered Agent

#### Officer/Director Detail :

TitlePDNameSCHWARTZ, LOREEAddressP O BOX 566761City-State-Zip:MIAMI FL 33256

OWNER

Certificate of Status Desired: No

03/27/2018

FILED
Mar 27, 2018
Secretary of State
CC4392746077

03/27/2018 Date

Date