

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000089511

Entity Name: ANTHONY T. LEPORE ESQ., P.A.

Current Principal Place of Business:

4101 ALBEMARLE ST NW #324
WASHINGTON, DC 20016

Current Mailing Address:

P.O. BOX 848842
HOLLYWOOD, FL 33084 US

FEI Number: 65-0636175

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MILES, KAY
10571 SANTA LAGUNA DRIVE
BOCA RATON, FL 33428 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 PD
Name LEPORE, ANTHONY T
Address 4101 ALBEMARLE ST NW #324
City-State-Zip: WASHINGTON DC 20016-2151

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: ANTHONY T. LEPORE

PRESIDENT

03/23/2015

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date