

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000045666

Entity Name: COVEMONT CORPORATION

Current Principal Place of Business:

522954
MIAMI, FL 33152

Current Mailing Address:

PO BOX 522954
MIAMI, FL 33152 US

FEI Number: 65-0840595

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROBERTO, TARAFA M
522954
MIAMI, FL 33152 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 DPS
Name TARAFA, ROBERTO M
Address PO BOX 522954
City-State-Zip: MIAMI FL 33152

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: ROBERTO C. TARAFA

MANAGER

04/18/2017

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date