#### SIGNATURE: PAUL HERTZ PRESIDENT

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

Electronic Signature of Signing Officer/Director Detail

above, or on an attachment with all other like empowered.

## **2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

# DOCUMENT# P98000069175

Entity Name: SHADOWFREE PUBLISHING COMPANY

## **Current Principal Place of Business:**

300 S. POINTE DRIVE #3605 MIAMI BEACH, FL 33139

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

300 S. POINTE DRIVE #3605 MIAMI BEACH, FL 33139 US

### FEI Number: 65-0878930

### Name and Address of Current Registered Agent:

LEVINE, DEBRA 300 S. POINTE DRIVE #3605 MIAMI BEACH, FL 33139 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:

## Officer/Director Detail ·

Officer/Director Detail :			
Title	PD	Title	DCEO
Name	LEVINE, DEBRA	Name	HERTZ, PAUL
Address	300 S. POINTE DRIVE 3605	Address	300 S. POINTE DR., #3605
City-State-Zip:	MIAMI BEACH FL 33139	City-State-Zip:	MIAMI BEACH FL 33139

Electronic Signature of Registered Agent

FILED Jan 28, 2021 Secretary of State 6424726171CC

Certificate of Status Desired: No

01/28/2021

Date

Date