## **2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# V03903

Entity Name: SOUTH FLORIDA APPLIANCE, INC.

**Current Principal Place of Business:** 

1890 W 4TH AVE HIALEAH. FL 33010

**Current Mailing Address:** 

1890 W 4TH AVE HIALEAH, FL 33010

FEI Number: 65-0304736 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NOVALES, RAUL P 1890 W. 4TH AVE. HIALEAH, FL 33010 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

FILED Jan 15, 2016

**Secretary of State** 

CC3860126815

Officer/Director Detail:

Title PST Title VPST

NameNOVALES, RAUL PABLONameNOVALES, ROALDAddress1890 WEST 4TH AVE.Address1890 WEST 4TH AVE.City-State-Zip:HIALEAH FL 33010City-State-Zip:HIALEAH FL 33010

Title COO, CHIEF MARKETING OFFICER

Name NOVALES, JUSTEN R Address 1890 W 4TH AVE

City-State-Zip: HIALEAH FL 33010

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: NOVALES RAUL PABLO

**PRESIDENT** 

01/15/2016

Electronic Signature of Signing Officer/Director Detail

Date