

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V67449

Entity Name: COMPUTER MEDIC CENTER OF NORTH PALM BEACH, INC.

Current Principal Place of Business:

ROBERT MAGILL
14426 67TH ST. NORTH
LOXAHATCHEE, FL 33470

Current Mailing Address:

14426 67TH ST N
LOXAHATCHEE, FL 33470 US

FEI Number: 65-0411433

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MAGILL, ROBERT K
14426 67TH ST N
LOXAHATCHEE, FL 33470 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 P
Name MAGILL, ROBERT K
Address 14426 67TH ST N
City-State-Zip: LOXAHATCHEE FL 33470

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: ROBERT K MAGILL

PRESIDENT

04/17/2019

Electronic Signature of Signing Officer/Director Detail

Date