

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000005641

**FILED  
Feb 18, 2019  
Secretary of State  
9040810884CC**

**Entity Name:** 123 CREDIT COUNSELORS, INC.

**Current Principal Place of Business:**

6161 BLUE LAGOON DRIVE  
150  
MIAMI, FL 33126

**Current Mailing Address:**

6161 BLUE LAGOON DRIVE  
150  
MIAMI, FL 33126 US

**FEI Number:** 20-3351880

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GARCIA, RICHARD A  
6161 BLUE LAGOON DRIVE  
150  
MIAMI, FL 33126 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            T  
Name            GARCIA, RICHARD A  
Address        6161 BLUE LAGOON DRIVE #150  
City-State-Zip: MIAMI FL 33126

Title            P  
Name            GARCIA, ELIZABETH  
Address        6161 BLUE LAGOON DRIVE #150  
City-State-Zip: MIAMI FL 33126

Title            D  
Name            DIAZ, LUIS  
Address        6161 BLUE LAGOON DRIVE #150  
City-State-Zip: MIAMI FL 33126

Title            D  
Name            PFEIFER, TIFFANY  
Address        6161 BLUE LAGOON DRIVE #150  
City-State-Zip: MIAMI FL 33126

Title            T  
Name            PFEIFER, TIFFANY  
Address        6161 BLUE LAGOON DRIVE #150  
City-State-Zip: MIAMI FL 33126

Title            D  
Name            GALLOR, ROLAND  
Address        6161 BLUE LAGOON DRIVE STE 150  
City-State-Zip: MIAMI FL 33126

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ELIZABETH N GARCIA

**PRESIDENT**

**02/18/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date