

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000043336

**Entity Name:** S 19, INC.

**Current Principal Place of Business:**

3900 NE 19TH ROAD #106  
POMPANO BEACH, FL 33064

**Current Mailing Address:**

3900 NE 19TH ROAD #106  
POMPANO BEACH, FL 33064

**FEI Number:** 47-4012232

**Certificate of Status Desired:** No

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

GOMEZ, GRACIELE MARIA  
3900 NE 19TH ROAD #106  
POMPANO BEACH, FL 33064 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 PVST  
Name GOMEZ, GRACIELE MARIA  
Address 3900 NE 19TH ROAD #106  
City-State-Zip: POMPANO BEACH FL 33064

*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:** GOMEZ , GRACIELE MARIA

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04/26/2017

Electronic Signature of Signing Officer/Director Detail

Date