

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000074410

Entity Name: C2C MANAGEMENT, INC.

Current Principal Place of Business:

4613 NORTH UNIVERSITY DRIVE, #392
CORAL SPRINGS, FL 33067

Current Mailing Address:

4613 NORTH UNIVERSITY DRIVE, SUITE 392
CORAL SPRINGS, FL 33067 US

FEI Number: 47-4996534

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ANDERSON REGISTERED AGENTS, INC.
1000 NORTH WASHINGTON BLVD.
SARASOTA, FL 34236 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 PRES
Name WARD, TARIN
Address 4613 NORTH UNIVERSITY DRIVE,
 SUITE 392
City-State-Zip: CORAL SPRINGS FL 33067

Title VP
Name WARD, TARIN
Address 4613 NORTH UNIVERSITY DRIVE,
 SUITE 392
City-State-Zip: CORAL SPRINGS FL 33067

Title TRES
Name WARD, TARIN
Address 4613 NORTH UNIVERSITY DRIVE,
 SUITE 392
City-State-Zip: CORAL SPRINGS FL 33067

Title SEC
Name WARD, TARIN
Address 4613 NORTH UNIVERSITY DRIVE,
 SUITE 392
City-State-Zip: CORAL SPRINGS FL 33067

Title DIR
Name WARD, TARIN
Address 4613 NORTH UNIVERSITY DRIVE,
 SUITE 392
City-State-Zip: CORAL SPRINGS FL 33067

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: TARIN WARD

PRESIDENT

04/11/2019

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date