# 2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P21000054397

Entity Name: JOCELYNE A. MACELLONI P.A.

### **Current Principal Place of Business:**

2701 PONCE DE LEON BLVD. 202 CORAL GABLES, FL 33134

# **Current Mailing Address:**

2701 PONCE DE LEON BLVD. 202 CORAL GABLES, FL 33134

### FEI Number: 87-1771557

### Name and Address of Current Registered Agent:

MACELLONI, JOCELYNE A 2701 PONCE DE LEON BLVD. 202 CORAL GABLES, FL 33134 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

### Officer/Director Detail :

TitlePNameMACELLONI, JOCELYNE AAddress2701 PONCE DE LEON BLVD.<br/>SUITE 202City-State-Zip:MIAMI FL 33134

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.

PRESIDENT

SIGNATURE: JOCELYNE A. MACELLONI

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date

01/23/2023 Date