## Certificate of Status Desired: No

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 :**

Title D ARES ROMERO, PATRICIA Name 12955 BISCAYNE BLVD Address SUITE 100

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: PATRICIA ARES ROMERO

Electronic Signature of Signing Officer/Director Detail

### 2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22000041211

Entity Name: DR. ARES AND ASSOCIATES CONSULTING, INC.

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

12955 BISCAYNE BLVD SUITE 100 NORTH MIAMI BEACH, FL 33181

#### **Current Mailing Address:**

12955 BISCAYNE BLVD SUITE 100 NORTH MIAMI BEACH, FL 33181 US

#### FEI Number: 68-0654060

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

ARES ROMERO, PATRICIA 12955 BISCAYNE BLVD SUITE 100 NORTH MIAMI BEACH, FL 33181 US

City-State-Zip: NORTH MIAMI BEACH FL 33181

01/30/2024

Date

Date

FILED Jan 30, 2024 Secretary of State 6551479994CC

OFFICER