

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 194287

**Entity Name:** DIMARE JOHNS ISLAND, INC.

**Current Principal Place of Business:**

258 N.W. FIRST AVENUE  
FLORIDA CITY, FL 33034

**Current Mailing Address:**

P.O. BOX 9000460  
HOMESTEAD, FL 33090-0460 US

**FEI Number:** 59-0779833

**Certificate of Status Desired:** No

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

CAPITOL CORPORATE SERVICES, INC.  
515 EAST PARK AVENUE 2ND FL  
TALLAHASSEE, FL 32301 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 DPST  
Name DIMARE, PAUL J.  
Address 258 N.W. 1ST AVE.  
City-State-Zip: FLORIDA CITY FL 33034

Title DV  
Name DIMARE, ANTHONY J  
Address 258 N.W. 1ST AVE.  
City-State-Zip: FLORIDA CITY FL 33034

Title DV  
Name DIMARE, SCOTT M  
Address 258 N W 1ST AVENUE  
City-State-Zip: FLORIDA CITY FL 33034

*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:** PAUL J. DIMARE

DPST

03/31/2021

Electronic Signature of Signing Officer/Director Detail

Date