

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 321688

Entity Name: LOTSPEICH CO. OF FLORIDA, INC.**Current Principal Place of Business:**6351 NORTHWEST 28 WAY
STE A
FT LAUDERDALE, FL 33309**Current Mailing Address:**6351 NORTHWEST 28 WAY
STE A
FT LAUDERDALE, FL 33309 US**FEI Number:** 59-1171393**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FEE, MICHAEL W
6351 NORTHWEST 28 WAY
STE A
FT LAUDERDALE, FL 33309 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:** MICHAEL W. FEE

01/28/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PARTNER
Name FEE, DAVID
Address 6351 NORTHWEST 28 WAY
STE A
City-State-Zip: FT LAUDERDALE FL 33309

Title VP
Name LIGON, JERRY
Address 6351 NORTHWEST 28 WAY
STE A
City-State-Zip: FT LAUDERDALE FL 33309

Title PRESIDENT
Name FEE, MICHAEL
Address 6351 NORTHWEST 28 WAY
STE A
City-State-Zip: FT LAUDERDALE FL 33309

Title EVP
Name FEE, JEFF
Address 6351 NW 28TH WAY, SUITE A
City-State-Zip: FORT LAUDERDALE FL 33309

Title EVP
Name GORDON, ROBERT
Address 6351 NW 28TH WAY, SUITE A
City-State-Zip: FORT LAUDERDALE FL 33309

Title CFO
Name DODGE, KARINA ODALIA
Address 6351 NORTHWEST 28 WAY
STE A
City-State-Zip: FT LAUDERDALE FL 33309

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: KARINA DODGE

CFO

01/28/2021

Electronic Signature of Signing Officer/Director Detail

Date