

2022 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F51928

Entity Name: DANTZLER, INC.**Current Principal Place of Business:**54 SW 6 STREET,
SUITE 200
MIAMI, FL 33130-3008**Current Mailing Address:**54 SW 6 STREET,
SUITE 200
MIAMI, FL 33130-3008 US**FEI Number:** 59-0213620**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**TRIGO, ALINA
54 SW 6 STREET,
SUITE 200
MIAMI, FL 33130-3008 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:** ALINA TRIGO

11/03/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name GODINEZ, ANTONIO D
Address 121 CAPE FLORIDA DRIVE
City-State-Zip: KEY BISCAYNE FL 33149

Title VP
Name GODINEZ, ANTONIO R
Address 121 CAPE FLORIDA DRIVE
City-State-Zip: KEY BISCAYNE FL 33149

Title DIRECTOR
Name FERNANDEZ DIAZ, LUIS J SR.
Address CARRETERA 865 KM 5.5
BARRIO CANDELARIA
City-State-Zip: SABANA SECA PR 00952

Title VP
Name FERNANDEZ, LUIS J JR.
Address PO BOX 362108, N/A
City-State-Zip: SAN JUAN, PUERTO RICO 00936-2108

Title TREASURER, ASST. SECRETARY
Name DECOS, HECTOR
Address CARRETERA 176 KM 5.2
CAMINO LOS GONZALEZ 1526 RR9
BOX 1526
City-State-Zip: CUPEY 00926

Title SECRETARY
Name TRIGO, ALINA
Address 54 SW 6 STREET,
SUITE 200
City-State-Zip: MIAMI FL 33130-3008

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: ALINA TRIGO**SECRETARY**

11/03/2022

Electronic Signature of Signing Officer/Director Detail

Date