

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H21965

**Entity Name:** STUDIO 8, INC.

**Current Principal Place of Business:**

2900 WEST BAYSHORE CT.  
TAMPA, FL 33611

**Current Mailing Address:**

2900 WEST BAYSHORE CT.  
TAMPA, FL 33611 US

**FEI Number:** 59-2447192

**Certificate of Status Desired:** No

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

JASSY, KAREN  
2900 WEST BAYSHORE CT.  
TAMPA, FL 33611 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           | PD                     | Title           | ST                     |
| Name            | JASSY, KAREN KELLY     | Name            | JASSY, KAREN KELLY     |
| Address         | 2900 WEST BAYSHORE CT. | Address         | 2900 WEST BAYSHORE CT. |
| City-State-Zip: | TAMPA FL 33611         | City-State-Zip: | TAMPA FL 33611         |

*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:** KAREN KELLY JASSY

**PRES.**

**02/14/2023**

Electronic Signature of Signing Officer/Director Detail

Date