

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000046082

**Entity Name:** SERVICESNAP, INC.

**Current Principal Place of Business:**

330 SW 2ND STREET  
SUITE 205  
FORT LAUDERDALE, FL 33312

**Current Mailing Address:**

330 SW 2ND STREET  
SUITE 205  
FORT LAUDERDALE, FL 33312 US

**FEI Number:** 65-1106624

**Certificate of Status Desired:** No

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

KASSOVER, BRUCE H  
1180 S.W. 15TH STREET  
BOCA RATON, FL 33486 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	VP	Title	VP
Name	KASSOVER, BRUCE	Name	STERNE, ROBIN
Address	1180 SW 15TH STREET	Address	330 SW 2ND STREET SUITE 205
City-State-Zip:	BOCA RATON FL 33486	City-State-Zip:	FORT LAUDERDALE FL 33312

*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:** ROBIN STERNE

**VICE PRESIDENT**

**04/09/2023**

Electronic Signature of Signing Officer/Director Detail

Date