

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000101296

**Entity Name:** MICRO MASTERS OF FLORIDA, INC.

**Current Principal Place of Business:**

2717 NORTH W STREET  
MAILBOX #6 SUITE E  
PENSACOLA, FL 32505

**Current Mailing Address:**

5051 GRANDE DR M1  
M-1  
PENSACOLA, FL 32504 US

**FEI Number:** 59-3752528

**Certificate of Status Desired:** No

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

NOVATKA, MARK J  
2717 NORTH W STREET  
MAIL BOX #6 SUITE E  
PENSACOLA, FL 32505 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 D/P  
Name NOVATKA, MARK J  
Address 2717 NORTH W STREET  
MAIL BOX #6 SUITE E  
City-State-Zip: PENSACOLA FL 32505

*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:** MARK J NOVATKA

**OWNER**

**04/06/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date