

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000109214

**Entity Name:** A SIGNATURE ONLY BAIL BONDS INC.**Current Principal Place of Business:**500 S ANDREWS AVE  
SUITE 190  
FT. LAUDERDALE, FL 33301**Current Mailing Address:**500 S. ANDREWS AVE  
SUITE 190  
FT. LAUDERDALE, FL 33301 US**FEI Number:** 20-2239494**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LAING, GERALD W  
500 S. ANDREWS AVE  
SUITE 190  
FT. LAUDERDALE, FL 33301 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 PVD  
Name LAING, GERALD W  
Address 500 S. ANDREWS AVE  
SUITE 190  
City-State-Zip: FT. LAUDERDALE FL 33301Title DIRECTOR  
Name VENEZIA, MICHAEL  
Address 500 S. ANDREWS AVE  
SUITE 190  
City-State-Zip: FT. LAUDERDALE FL 33301Title DIRECTOR  
Name MALAMUD, ALEXANDRA  
Address 500 S. ANDREWS AVE  
SUITE 190  
City-State-Zip: FT. LAUDERDALE FL 33301Title VSD  
Name DURKEE, MARK T  
Address 500 S. ANDREWS AVE  
SUITE 190  
City-State-Zip: FT. LAUDERDALE FL 33301Title DIRECTOR  
Name BRIOSO, ROMMEL  
Address 500 S. ANDREWS AVE  
SUITE 190  
City-State-Zip: FT. LAUDERDALE FL 33301

*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:** GERALD LAING**PRESIDENT****04/30/2023**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date