

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000124664

Entity Name: FUSA CORP**Current Principal Place of Business:**10100 NW 116TH WAY
SUITE #14
MEDLEY, FL 33178**Current Mailing Address:**10100 NW 116TH WAY
SUITE #14
MEDLEY, FL 33178 US**FEI Number:** 16-1621125**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KLOMPARENS, CRAIG A
1100 BRICKELL BAY DRIVE
APT 44-A
MIAMI, FL 33131 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	P
Name	KLOMPARENS, CRAIG A
Address	1100 BRICKELL BAY DRIVE APT 44-A
City-State-Zip:	MIAMI FL 33131

Title	S
Name	OBESO, JOAQUIN
Address	10435 SW 130TH AVE
City-State-Zip:	MIAMI FL 33176

Title	V
Name	OBESO, JOAQUIN
Address	10435 SW 130TH AVE
City-State-Zip:	MIAMI FL 33176

Title	T
Name	KLOMPARENS, CRAIG A
Address	1100 BRICKELL BAY DRIVE APT 44-A
City-State-Zip:	MIAMI FL 33131

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: CRAIG A KLOMPARENS**PRESIDENT****04/18/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date