

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000040054

**Entity Name:** SAPA TRANSMISSION, INC.**Current Principal Place of Business:**1428 SE 4 AVE  
A101  
DEERFIELD BEACH, FL 33441**Current Mailing Address:**51901 SHELBY PARKWAY  
SHELBY TOWNSHIP, MI 48315 US**FEI Number:** 05-0566879**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BALTA, DENIZ  
1428 SE 4TH AVE  
A101  
DEERFIELD BEACH, FL 33441 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
Name	APERRIBAY, IBON
Address	1428 SE 4TH AVE A101
City-State-Zip:	DEERFIELD BEACH FL 33441

Title	PRESIDENT
Name	APERRIBAY, JOKIN
Address	1428 SE 4TH AVE A101
City-State-Zip:	DEERFIELD BEACH FL 33441

Title	VP
Name	BALTA, DENIZ
Address	1428 SE 4TH AVE A101
City-State-Zip:	DEERFIELD BEACH FL 33441

Title	SECRETARY
Name	GASTAMINZA, BORJA
Address	1428 SE 4TH AVE A101
City-State-Zip:	DEERFIELD BEACH FL 33441

Title	TREASURER
Name	ARBELAITZ, IBON APERRIBAY
Address	1428 SE 4TH AVE A101
City-State-Zip:	DEERFIELD BEACH FL 33441

*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:** DENIZ BALTA

VP

03/10/2024

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