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. 04/08/2021

SIGNATURE: ORALDO CASTRO

Electronic Signature of Signing Officer/Director Detail

Current Principal Place of Business: 12315 S.W. 35TH TERRACE MIAMI, FL 33175

Entity Name: DAVID'S .99 CTS, CORP.

Current Mailing Address:

DOCUMENT# P03000112283

12315 S.W. 35TH TERRACE MIAMI. FL 33175

FEI Number: 51-0486312

Name and Address of Current Registered Agent:

CASTRO, ORALDO 12315 S.W. 35TH TERRACE MIAMI, FL 33175 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

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Officer/Director Detail :

Title	PD	Title	VD
Name	CASTRO, ORALDO	Name	ELIZALDE, MABEL
Address	12315 S.W. 35TH TERRACE	Address	12315 S.W. 35TH TERRACE
City-State-Zip:	MIAMI FL 33175	City-State-Zip:	MIAMI FL 33175

Certificate of Status Desired: No

FILED Apr 08, 2021 Secretary of State 6133486503CC

Date

Date

PRESIDENT