

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000039692

**Entity Name:** PRINTER'S COVE, INC.

**Current Principal Place of Business:**

13760 NW 19TH AVE  
SUITE #5  
OPA LOCKA, FL 33054

**Current Mailing Address:**

13760 NW 19TH AVE  
SUITE #5  
OPA LOCKA, FL 33054 US

**FEI Number:** 20-0815391

**Certificate of Status Desired:** No

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

DIAZ, DAMASO J  
13760 NW 19TH AVE  
SUITE #1 SUITE #5  
OPA LOCKA, FL 33054 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            PRESIDENT, OWNER  
Name            DIAZ, DAMASO J  
Address        6620 SW 5TH STREET  
City-State-Zip: PEMBROKE PINES FL 33023

Title            VICE PRESIDENT  
Name            DIAZ, ALEXANDER D  
Address        6620 SW 5TH STREET  
City-State-Zip: PEMBROKE PINES FL 33023

*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:** DAMASO J DIAZ

**PRESIDENT**

**07/22/2024**

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

\_\_\_\_\_  
Date