| Entity Name: CRESPO 1 | TILE, INC. |
|-----------------------|------------|
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2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

## **Current Principal Place of Business:**

1428 LESTER DR #69 KISSIMMEE, FL 34741

### **Current Mailing Address:**

DOCUMENT# P04000091240

1428 LESTER DR #69 KISSIMMEE, FL 34741

## FEI Number: 20-1239619

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

CRESPO, VALERIE 1428 LESTER DR #69 KISSIMMEE, FL 34741 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                 | VALERIE CRESPO DURAN                     |                 |                           | 02/25/2021 |  |
|---------------------------|--|-----------------|---------------------------|------------|--|
|                           | Electronic Signature of Registered Agent |                 |                           | Date       |  |
| Officer/Director Detail : |  |                 |                           |            |  |
| Title                     | V  | Title           | Р                         |            |  |
| Name                      | CRESPO, GUSTAVO                          | Name            | CRESPO, VALERIE           |            |  |
| Address                   | 1428 LESTER DR #69                       | Address         | 1428 LESTER DR            |            |  |
| City-State-Zip:           | KISSIMMEE FL 34741                       | City-State-Zip: | #69<br>KISSIMMEE FL 34741 |            |  |

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.

PRESIDENT

# SIGNATURE: VALERIE CRESPO DURAN

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

02/25/2021 Date