

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000004674

**Entity Name:** COMPASS CARRIERS, INC.

**Current Principal Place of Business:**

2455 E. SUNRISE BLVD., SUITE #1103  
FORT LAUDERDALE, FL 33304

**Current Mailing Address:**

2455 E. SUNRISE BLVD., SUITE #1103  
FORT LAUDERDALE, FL 33304

**FEI Number:** 20-2172604

**Certificate of Status Desired:** No

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

ADAMS, NATALIE M  
2455 E. SUNRISE BLVD., SUITE #1103  
FORT LAUDERDALE, FL 33334 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:** NATALIE M. ADAMS

02/18/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name EKBERG, JONAS  
Address 2455 E. SUNRISE BLVD., SUITE #1103  
City-State-Zip: FORT LAUDERDALE FL 33304

Title VP  
Name PETER KROKSTEDT TRUST DATED  
JANUARY 16, 2008  
Address 2455 E. SUNRISE BLVD., SUITE #1103  
City-State-Zip: FORT LAUDERDALE FL 33304

Title S  
Name HOCKMAN, DON  
Address 2455 E. SUNRISE BLVD., SUITE #1103  
City-State-Zip: FORT LAUDERDALE FL 33304

*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:** NATALIE M ADAMS

REGISTERED AGENT

02/18/2021

Electronic Signature of Signing Officer/Director Detail

Date