2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT
DOCUMENT\# P05000017132
Entity Name: DEALERAPS, INC.

## Current Principal Place of Business:

8860 NW 18TH TERRACE
DORAL, FL 33172

## Current Mailing Address:

8860 NW 18TH TERRACE
DORAL, FL 33172 US
FEI Number: 30-0303582
Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

ROS, MIGUEL PD
8860 NW 18TH TERRACE
DORAL, FL 33172 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 | PD | Title | V D |
| :--- | :--- | :--- | :--- |
| Name | ROS, MIGUEL PD | Name | ROS, JOSE |
| Address | 10849 NASHVILLE DR. | Address | 15281 SW 114 TERRACE |
| City-State-Zip: | COOPER CITY FL 33026 | City-State-Zip: | MIAMI FL 33196 |
| Title | TSD |  |  |
| Name | ROS, YOLANDA D |  |  |
| Address | 10849 NASHVILLE DRIVE |  |  |
| City-State-Zip: | COOPER CITY FL 33026 |  |  |

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.

