

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000024278

**Entity Name:** MR. MULTISERVICES, INC.

**Current Principal Place of Business:**

17035 44TH PL NORTH  
LOXAHATCHEE, FL 33470

**Current Mailing Address:**

17035 44TH PLACE NORTH  
LOXAHATCHEE, FL 33470 US

**FEI Number:** 01-0886822

**Certificate of Status Desired:** No

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

RAMOS AGUILAR, MIGUEL ARTURO  
17035 44TH PLACE NORTH  
LOXAHATCHEE, FL 33470 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 P  
Name RAMOS AGUILAR, MIGUEL ARTURO  
Address 17035 44TH PLACE NORTH  
City-State-Zip: LOXAHATCHEE FL 33470

Title VP  
Name LOPEZ, JENNIFER  
Address 17035 44TH PLACE NORTH  
City-State-Zip: LOXAHATCHEE FL 33470

Title TREASURER  
Name RAMOS-LOPEZ, JASON  
Address 17035 44TH PL NORTH  
City-State-Zip: LOXAHATCHEE FL 33470

*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:** JASON RAMOS-LOPEZ

TREASURER

01/22/2021

Electronic Signature of Signing Officer/Director Detail

Date