

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000086138

**FILED  
Apr 30, 2019  
Secretary of State  
6616946587CC**

**Entity Name:** DUALIS CONSULTING CORP.

**Current Principal Place of Business:**

100 KINGS POINT DRIVE  
SUITE 803  
SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:**

100 KINGS POINT DRIVE  
SUITE 1616  
SUNNY ISLES BEACH, FL 33160 US

**FEI Number:** 27-1158656

**Certificate of Status Desired:** No

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

LUCES, HERADIO  
100 KINGS POINT DRIVE  
SUITE 1616  
SUNNY ISLES BEACH, FL 33160 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  
Name            LUCES, HERADIO  
Address        100 KINGS POINT DRIVE  
                  SUITE 803  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title            VP  
Name            LUCES, YERINA MARIA  
Address        100 KINGS POINT DRIVE  
                  SUITE 803  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title            S  
Name            MEJIAS, YERINA  
Address        100 KINGS POINT DRIVE  
                  SUITE 803  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title            T  
Name            LUCES, HERADIO  
Address        100 KINGS POINT DRIVE  
                  SUITE 803  
City-State-Zip: SUNNY ISLES BEACH FL 33160

*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:** HERADIO LUCES

**PRESIDENT**

**04/30/2019**

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

\_\_\_\_\_  
Date