2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000043982

Entity Name: SURPLUSUNLIMITED, INC.

Current Principal Place of Business:

18459 PINE BLVD 137 PEMBROKE PINES, FL 33029

Current Mailing Address:

18459 PINE BLVD 137 PEMBROKE PINES, FL 33029 US

FEI Number: 45-2132106

Name and Address of Current Registered Agent:

STERLING ACCOUNTING, LLC 2435 N DIXIE HWY WILTON BEACH, FL 33305 US FILED Jan 26, 2022 Secretary of State 0490736692CC

Certificate of Status Desired: No

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

Officer/Director Detail :

	Title	OTHER	Title	PRESIDENT
	Name	WHITE, CHRISTOPHER	Name	RONALD, FRANK
	Address	18459 PINE BLVD 137	Address	18459 PINE BLVD 137
	City-State-Zip:	PEMBROKE PINES FL 33029	City-State-Zip:	PEMBROKE PINES FL 33029
	Title	OTHER	Title	OTHER
	Name	JERRY, MITCHELL	Name	MITCHELL, JOSHUA
	Address	18459 PINE BLVD 137	Address	18459 PINE BLVD 137
	City-State-Zip:	PEMBROKE PINES FL 33029	City-State-Zip:	PEMBROKE PINES FL 33029
	Title	OTHER	Title	SALES MANAGER
	Name	VLADO, JASON	Name	BENSON, BROOKE
	Address	18459 PINE BLVD	Address	19459 PINES BLVD
	City-State-Zip:	137 PEMBROKE PINES FL 33029	City-State-Zip: I	MIRAMAR FL
	Title	SALES	Title	OTHER
	Name	VLADO , JUSTIN	NameWHITE, SOPHIEAddress2231 N 55TH AVECity-State-Zip:HOLLYWOOD FL	WHITE, SOPHIE
	Address	18459 PINES BLVD		2231 N 55TH AVE
				HOLLYWOOD FL
	City-State-Zip:	HOLLYWOOD FL		

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: RONALD FRANK

PRESENT

Electronic Signature of Signing Officer/Director Detail

Date