

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000033431

**Entity Name:** PREMA NEXUS CONSULTANTS INC.

**Current Principal Place of Business:**

940 SWEETWATER LANE  
APT# 401  
BOCA RATON, FL 33431

**FILED**  
**Mar 07, 2024**  
**Secretary of State**  
**1742024031CC**

**Current Mailing Address:**

940 SWEETWATER LANE  
APT# 401  
BOCA RATON, FL 33431 US

**FEI Number:** 47-3714221

**Certificate of Status Desired:** No

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

KIRSCHNER, SAM PH.D.  
4301 NORTH OCEAN BLVD  
APT# 1403  
BOCA RATON, FL 33431 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  
Name KIRSCHNER, SAM PH.D.  
Address 940 SWEETWATER LANE  
APT# 401  
City-State-Zip: BOCA RATON FL 33431

Title STD  
Name KIRSCHNER, DIANA PH.D.  
Address 940 SWEETWATER LANE  
APT# 401  
City-State-Zip: BOCA RATON FL 33431

*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:** SAM KIRSCHNER

**PRESIDENT**

**03/07/2024**

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

\_\_\_\_\_  
Date