

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000066942

**Entity Name:** ALLEGATOR APPLIANCE REPAIR SERVICES INC.

**Current Principal Place of Business:**

1817 SOUTH OCEAN DRIVE  
# 927  
HALLANDALE BEACH, FL 33009-4974

**Current Mailing Address:**

1817 SOUTH OCEAN DRIVE  
# 927  
HALLANDALE BEACH, FL 33009-4974 US

**FEI Number:** 81-3587766

**Certificate of Status Desired:** No

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

TRUTENKO, MAXIM  
1817 SOUTH OCEAN DRIVE  
# 927  
HALLANDALE BEACH, FL 33009-4974 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            PRES  
Name            TRUTENKO, MAXIM  
Address        1817 SOUTH OCEAN DRIVE  
                  # 927  
City-State-Zip: HALLANDALE BEACH FL 33009-4974

*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:** TRUTENKO, MAXIM

**PRESIDENT**

**02/01/2023**

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

\_\_\_\_\_  
Date