

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000096845

**Entity Name:** 19VARIS90 INC

**Current Principal Place of Business:**

10200 BELLE RIVE  
APT 4  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

10200 BELLE RIVE  
APT 4  
JACKSONVILLE, FL 32256

**FEI Number:** 81-4658164

**Certificate of Status Desired:** No

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

JOHNSON, JAVARIS  
10200 BELLE RIVE  
APT 4  
JACKSONVILLE, FL 32256 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 PVST  
Name JOHNSON, JAVARIS  
Address 10200 BELLE RIVE APT 4  
City-State-Zip: JACKSONVILLE FL 32256

*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:** JAVARIS JOHNSON

**PRESIDENT**

**04/27/2018**

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

\_\_\_\_\_  
Date