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: JULIO M MORALES

Electronic Signature of Signing Officer/Director Detail

**3 S JOHN YOUNG PKWY** KISSIMMEE, FL 34741

Entity Name: CREDIT REPAIR STORE INC

**Current Principal Place of Business:** 

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

## **Current Mailing Address:**

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DOCUMENT# P17000022102

**3 S JOHN YOUNG PKWY** 5 KISSIMMEE, FL 34741

### FEI Number: 82-0781185

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

GENERAL CONNECTION LLC **3 S JOHN YOUNG PKWY** KISSIMMEE, FL 34741 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

#### Officer/Director Detail :

Title	Р	Title	VP
Name	MORALES, JULIO	Name	MORALES, RUTH
Address	3 S JOHN YOUNG PKWY SUITE 5	Address	3 S JOHN YOUNG PKWY SUITE 5
City-State-Zip:	KISSIMMEE FL 34741	City-State-Zip:	KISSIMMEE FL 34741
Title	SECRETARY		
Name	MORALES, NATASHA N		
Address	3 S JOHN YOUNG PKWY 5		
City-State-Zip:	KISSIMMEE FL 34741		

# FILED Mar 30, 2018 Secretary of State CC1905870933

Certificate of Status Desired: No

PRESIDENT

03/30/2018

Date

Date