above, or on an attachment with all other like empowered. PRESIDENT

SIGNATURE: JULIO M MORALES

City-State-Zip: KISSIMMEE FL 34741

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

FILED Apr 30, 2019

Secretary of State

9432123122CC

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	E: JULIO M MORALES			04/30/2019
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	Р	Title	VP	
Name	MORALES, JULIO M	Name	MORALES, RUTH N	
Address	600 N. THACKER AVE SUITE A-1	Address	600 N. THACKER AVE SUITE A-1	
City-State-Zip:	KISSIMMEE FL 34741	City-State-Zip:	KISSIMMEE FL 34741	
Title	SECRETARY			
Name	MORALES, NATASHA N			
Address	600 N. THACKER AVE SUITE A-1			

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

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17000022102

Entity Name: CREDIT REPAIR STORE INC

Current Principal Place of Business:

600 N THACKER AVE SUITE A-1 KISSIMMEE, FL 34741

Current Mailing Address:

600 N. THACKER AVE SUITE A-1 KISSIMMEE, FL 34741 US

FEI Number: 82-0781185

Name and Address of Current Registered Agent:

MORALES, JULIO M 600 N THACKER AVE SUITE A-1 KISSIMMEE, FL 34741 US

Date

04/30/2019