

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P19000012189

**Entity Name:** OCAQUATICS 5, INC.

**Current Principal Place of Business:**

59 MERRICK WAY  
MIAMI, FL 33134

**FILED**  
**Jan 19, 2024**  
**Secretary of State**  
**8311500349CC**

**Current Mailing Address:**

11101 SW 176TH ST  
MIAMI, FL 33157 US

**FEI Number: 83-3758821**

**Certificate of Status Desired: No**

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

DEAS, ALEXANDRA L  
2215 RIVER BLVD  
JACKSONVILLE, FL 32204 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            D  
Name            OCA, MIREN  
Address        8675 SW 64TH ST  
City-State-Zip: MIAMI FL 33143

Title            PVST  
Name            OCA, MIREN  
Address        8675 SW 64TH ST  
City-State-Zip: MIAMI FL 33143

*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: MIREN OCA**

**D**

**01/19/2024**

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

\_\_\_\_\_  
Date