

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P19000057359

Entity Name: AUTHENTIC EXPERIENCE SERVICES, INC.

Current Principal Place of Business:

3830 CENTRAL AVE.
SUITE 107
FORT MYERS, FL 33901

Current Mailing Address:

3830 CENTRAL AVE.
SUITE 107
FORT MYERS, FL 33901

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ABAD-GUTIERREZ, MAURA I
3830 CENTRAL AVE.
SUITE 107
FORT MYERS, FL 33901 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 P
Name ABAD-GUTIERREZ, MAURA I
Address 3830 CENTRAL AVE., SUITE 107
City-State-Zip: FORT MYERS FL 33901

Title VP
Name ABAD-GUTIERREZ, MAURA I
Address 3830 CENTRAL AVE., SUITE 107
City-State-Zip: FORT MYERS FL 33901

Title T
Name ABAD-GUTIERREZ, MAURA I
Address 3830 CENTRAL AVE., SUITE 107
City-State-Zip: FORT MYERS FL 33901

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: ABAD-GUTIERREZ , MAURA I

P

06/01/2020

Electronic Signature of Signing Officer/Director Detail

Date