above, or on an attachment with all other like empowered. SIGNATURE: LYNN DOMINIQUE OWNER

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

Electronic Signature of Signing Officer/Director Detail

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P19000072864

Entity Name: VR ADVENTURE ZONE INC

Current Principal Place of Business:

5 CALHOUN AVE 502 DESTIN, FL 32541

Current Mailing Address:

5 CALHOUN AVE 502 DESTIN, FL 32541

FEI Number: 84-3049733

Name and Address of Current Registered Agent:

DOMINIQUE, LYNN 5 CALHOUN AVE 502 DESTIN, FL 32541 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	Ρ	Title	VP
Name	DOMINIQUE, LYNN	Name	KAISER, SHELLEY
Address	5 CALHOUN AVE. 502	Address	5 CALHOUN AVE. 502
City-State-Zip:	DESTIN FL 32541	City-State-Zip:	DESTIN FL 32541

May 01, 2021 Secretary of State 2848543356CC

Date

FILED

Certificate of Status Desired: No

05/01/2021 Date