

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P20000021729

**Entity Name:** A-NET PAY, INC.

**FILED**  
**Feb 18, 2023**  
**Secretary of State**  
**5356537136CC**

**Current Principal Place of Business:**

1 AEROPOST WAY  
KIN 100875  
MIAMI, FL 33206

**Current Mailing Address:**

P.O. BOX 25580  
KIN 100875  
MIAMI, FL 33102

**FEI Number:** 61-1961405

**Certificate of Status Desired:** No

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

GORDON-WHYTE, GIAN  
1 AEROPOST WAY  
KIN 20835  
MIAML, FL 33206 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 MARTINEZ, ROBERT  
Address 1 AEROPOST WAY KIN 100875  
City-State-Zip: MIAMI FL 33206

Title VP  
Name BUDHOO-MARTINEZ, ANGELENE  
Address 1 AEROPOST WAY KIN 100875  
City-State-Zip: MIAMI FL 33206

*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:** ROBERT MARTINEZ

**PRESIDENT**

**02/18/2023**

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

\_\_\_\_\_  
Date