

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P20000058815

**Entity Name:** DREAMCRAFTS. CORP

**Current Principal Place of Business:**

723 SW 6TH STREET  
UNIT 5  
HALLANDALE, FL 33009

**Current Mailing Address:**

723 SW 6TH STREET  
UNIT 5  
HALLANDALE, FL 33009

**FEI Number:** 85-2385292

**Certificate of Status Desired:** No

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

BORTCOV, OLEG  
723 SW 6TH STREET  
UNIT 5  
HALLANDALE, FL 33009 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 BORTCOV, OLEG  
Address 723 SW 6TH STREET  
City-State-Zip: HALLANDALE FL 33009

Title VP  
Name DAMARATSKAYA, MARYIA  
Address 723 SW 6TH STREET  
City-State-Zip: HALLANDALE FL 33009

*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:** BORTCOV OLEG

**PRESIDENT**

**04/25/2022**

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

\_\_\_\_\_  
Date