

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P20000098961

Entity Name: DOVI STUDIO INC.

Current Principal Place of Business:

5967 BROKEN BOW LANE
PORT ORANGE, FL 32127

Current Mailing Address:

5967 BROKEN BOW LANE
PORT ORANGE, FL 32127 US

FEI Number: 86-1211740

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KEVCO, INC.
214 LOOMIS AVE
DAYTONA BEACH, FL 32114 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 BOLAS, DOUGLAS A
Address 5967 BROKEN BOW LANE
City-State-Zip: PORT ORANGE FL 32127

Title VP
Name BOLAS, VICKI JO
Address 5967 BROKEN BOW LANE
City-State-Zip: PORT ORANGE FL 32127

Title MBR
Name MARINO, GINGER
Address 2526 HOLLY BERRY CIRCLE
City-State-Zip: CLERMONT FL 34711

Title MBR
Name VOSTREJS, ANTHONY
Address 3502 BAYFAIR PLACE
City-State-Zip: TAMPA FL 33629

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: DOUGLAS A. BOLAS

PRESIDENT

04/30/2024

Electronic Signature of Signing Officer/Director Detail

Date