

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P21000022633

**Entity Name:** GOLDENICLOUD SOLUTIONS INC.

**Current Principal Place of Business:**

555 WINDERLEY PLACE  
SUITE 300  
MAITLAND, FL 32751

**Current Mailing Address:**

5268 LOS PALMA VISTA DR  
ORLANDO, FL 32837 US

**FEI Number:** 86-2744005

**Certificate of Status Desired:** No

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

SUVARNAKANTI, RAVI CHAND  
14150 SANCTUARY COVE LN  
102  
ORLANDO, FL 32832 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 KOSURI, CHANDANA DEVI  
Address 14150 SANCTUARY COVE LN  
City-State-Zip: ORLANDO FL 32832

Title VP  
Name SUVARNAKANTI, RAVI  
Address 14150 SANCTUARY COVE LN  
City-State-Zip: ORLANDO FL 32832

*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:** RAVI SUVARNAKANTI

**VICE PRESIDENT**

**07/17/2024**

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

\_\_\_\_\_  
Date