# 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: HECTOR CARDONA

Electronic Signature of Signing Officer/Director Detail

OFFICER

# 04/02/2024

Date

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 :

Officer/Director Detail :			
Title	OFFICER	Title	OFFICER
Name	CARDONA, HECTOR	Name	CARDONA, INGRID
Address	10145 SUNRISE LAKES BLVD 201	Address	10145 SUNRISE LAKES BLVD 201
City-State-Zip:	SUNRISE FL 33322	City-State-Zip:	SUNRISE FL 33322

# 2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22000019495

Entity Name: 10145 SUNRISE LAKES BLVD 201 CORP

# Current Principal Place of Business:

10145 SUNRISE LAKES BLVD 201 SUNRISE, FL 33322

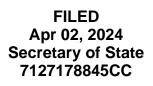
# Current Mailing Address:

10145 SUNRISE LAKES BLVD 201 SUNRISE, FL 33322

#### FEI Number: 88-1266471

# Name and Address of Current Registered Agent:

LEON, JOSE 8333 W MCNAB RD STE 114 TAMARAC, FL 33321 US



Certificate of Status Desired: No