

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P22000022925

**Entity Name:** 1811 IOTLPAD INC

**Current Principal Place of Business:**

C/O 4779 COLLINS AVE APT 608  
MIAMI BEACH, FL 33140

**Current Mailing Address:**

C/O 4779 COLLINS AVE APT 608  
MIAMI BEACH, FL 33140 US

**FEI Number:** 36-5015182

**Certificate of Status Desired:** No

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

CORDOVA, ANGEL D  
780 NW 42 AVE STE 325  
MIAMI, FL 33126 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 DP  
Name SZAPIRO, MAX  
Address 2750 NE 183RD ST UNIT 2108  
City-State-Zip: AVENTURA FL 33160

Title VPT  
Name SZAPIRO, ISAAC  
Address 2750 NE 183RD ST UNIT 2108  
City-State-Zip: AVENTURA FL 33160

*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:** MAX SZAPIRO

**PRESIDENT**

**02/18/2023**

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

\_\_\_\_\_  
Date