

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P23000005740

**Entity Name:** NETWORK SOLUTIONS GROUP INC

**Current Principal Place of Business:**

4822 CYPRESS SERENITY DR.  
PLANT CITY, FL 33565

**Current Mailing Address:**

4822 CYPRESS SERENITY DR.  
PLANT CITY, FL 33565

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

DOKIC, DEJAN  
4822 CYPRESS SERENITY DR.  
PLANT CITY, FL 33565 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 DOKIC, DEJAN  
Address 4822 CYPRESS SERENITY DR.  
City-State-Zip: PLANT CITY FL 33565

Title VP  
Name DOKIC, SANELA  
Address 4822 CYPRESS SERENITY DR.  
City-State-Zip: PLANT CITY FL 33565

*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:** DEJAN DOKIC

**PRESIDENT AND CEO**

**04/01/2024**

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

\_\_\_\_\_  
Date