

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P23000045073

**Entity Name:** DREAM COVERAGE CORP

**Current Principal Place of Business:**

13355 SW 135TH AVENUE  
STE 212  
MIAMI, FL 33186

**Current Mailing Address:**

13355 SW 135TH AVENUE  
STE 212  
MIAMI, FL 33186 US

**FEI Number:** 93-1852286

**Certificate of Status Desired:** No

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

OBREGON, ADRIAN L  
13355 SW 135TH AVENUE  
STE 212  
MIAMI, FL 33186 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	Title	VP
Name	OBREGON, ADRIAN L	Name	OBREGON, YAMILA
Address	13355 SW 135TH AVENUE STE 212	Address	5201 SW 163RD CT STE 212
City-State-Zip:	MIAMI FL 33186	City-State-Zip:	MIAMI FL 33185

*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:** ADRIAN L OBREGON

P

04/30/2024

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

\_\_\_\_\_  
Date