

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P23000061376

**Entity Name:** LC PRO SOLUTIONS CORP

**Current Principal Place of Business:**

4408 PINEBARK AVE  
ORLANDO, FL 32811

**Current Mailing Address:**

4408 PINEBARK AVE  
ORLANDO, FL 32811 US

**FEI Number:** 93-3097055

**Certificate of Status Desired:** No

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

CRISTOVAO, ALYSONN S  
4408 PINEBARK AVE  
ORLANDO, FL 32811 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            | CRISTOVAO, ALYSONN S | Name            | DE LIMA CRISTOVAO, ANA JULIA |
| Address         | 4408 PINEBARK AVE    | Address         | 4408 PINEBARK AVE            |
| City-State-Zip: | ORLANDO FL 32811     | City-State-Zip: | ORLANDO FL 32811             |

*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:** ALYSONN S CRISTOVAO

P

04/17/2024

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

\_\_\_\_\_  
Date