

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000007111

Entity Name: THE CREW SHUTTLE, INC.**Current Principal Place of Business:**415 NE 111 STREET
MIAMI, FL 33161**Current Mailing Address:**415 NE 111 STREET
MIAMI, FL 33161 US**FEI Number:** 65-0412385**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHAZULLE, ROSE
RMC PROFESSIONAL SERVICES, LLC
2060 NW 22 AVE STE 2
MIAMI, FL 33142 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 | PVP |
| Name | CASANOVA, DOBRILA |
| Address | 162 NE 25TH STREET |
| City-State-Zip: | MIAMI FL 33137 |

| | |
|-----------------|----------------------|
| Title | VP |
| Name | CASANOVA, PEDRO J JR |
| Address | 415 NE 111 ST |
| City-State-Zip: | MIAMI FL 33161 |

| | |
|-----------------|-------------------|
| Title | T |
| Name | SANTIAGO, CINTHYA |
| Address | 415 NE 111 ST |
| City-State-Zip: | MIAMI FL 33161 |

| | |
|-----------------|----------------|
| Title | S |
| Name | VINAS, ALEX |
| Address | 415 NE 111 ST |
| City-State-Zip: | MIAMI FL 33161 |

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: DOBRILA E CASANOVA

C.E.O

01/25/2022

Electronic Signature of Signing Officer/Director Detail_____
Date