

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000045801

**Entity Name:** 1194 CORP.

**Current Principal Place of Business:**

10180 RIVERSIDE DRIVE  
SUITE 5  
PALM BEACH GARDENS, FL 33410

**Current Mailing Address:**

10180 RIVERSIDE DRIVE  
SUITE 5  
PALM BEACH GARDENS, FL 33410 US

**FEI Number:** 65-0503432

**Certificate of Status Desired:** No

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

MURRAY, DICKRON E  
1037 COUNTRY CLUB DR.  
N. PALM BEACH, FL, FL 33408 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:** DICKRON MURRAY

02/14/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name MURRAY, DICKRON E  
Address 1037 COUNTRY CLUB DRIVE  
City-State-Zip: N. PALM BEACH FL 33408

Title D, SECRETARY  
Name MURRAY, MARJORIE L  
Address 1037 COUNTRY CLUB DRIVE  
City-State-Zip: N. PALM BEACH FL 33408

Title D  
Name WILSON, EDWARD  
Address 1120 S. FEDERAL HWY, STE B  
City-State-Zip: FT. LAUDERDALE FL 33316

Title VP  
Name WHITAKER, MARJORIE L  
Address 500 MARLIN ROAD  
City-State-Zip: NORTH PALM BEACH FL 33408

*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:** DICKRON E MURRAY

PRESIDENT

02/14/2022

Electronic Signature of Signing Officer/Director Detail

Date