

**2024 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

01/22/2024

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

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

01/22/2024

Electronic Signature of Signing Officer/Director Detail

Date