

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000092354

**Entity Name:** OTRAPUS, LLC

**Current Principal Place of Business:**

7643 GATE PARKWAY - STE. 104-631  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

7643 GATE PARKWAY - STE. 104-631  
JACKSONVILLE, FL 32256 US

**FEI Number:** 26-4361934

**Certificate of Status Desired:** No

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

SUPARTO, PHILIPUS  
6941 AZALEA GROVE DR.  
JACKSONVILLE, FL 32258 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

**Authorized Person(s) Detail :**

Title            PRESIDENT  
Name            SUPARTO, PHILIPUS  
Address        6941 AZALEA GROVE DR.  
City-State-Zip: JACKSONVILLE FL 32258

Title            VP  
Name            SUPARTO, PHILIPUS  
Address        6941 AZALEA GROVE DR.  
City-State-Zip: JACKSONVILLE FL 32258

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** PHILIPUS SUPARTO

**PRESIDENT**

**04/07/2021**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date