

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F19000004236

**Entity Name:** DIMENSIONS, INC.

**Current Principal Place of Business:**

10752 DEERWOOD PARK BLVD.  
SOUTH WATERVIEW II, SUITE:100  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

10752 DEERWOOD PARK BLVD.  
SOUTH WATERVIEW II, SUITE:100  
JACKSONVILLE, FL 32256 US

**FEI Number:** 31-1445083

**Certificate of Status Desired:** Yes

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

SCHWARTZ, ZACHARY  
10752 DEERWOOD PARK BLVD.  
SOUTH WATERVIEW II, SUITE:100  
JACKSONVILLE, FL 32256 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  
Name SCHWARTZ, NEIL  
Address 10752 DEERWOOD PARK BLVD.  
City-State-Zip: JACKSONVILLE FL 32256

Title VP  
Name SCHWARTZ, ZACHARY  
Address 10752 DEERWOOD PARK BLVD.  
City-State-Zip: JACKSONVILLE FL 32256

*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:** NEIL SCHWARTZ

**PRESIDENT**

**02/03/2023**

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

\_\_\_\_\_  
Date