

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F20000005520

Entity Name: SAINT THOMAS BUSINESS SERVICES, INC**Current Principal Place of Business:**17301 BROADWAY ST., #152
ALVA, FL 33920**Current Mailing Address:**17301 BROADWAY ST.
#152
ALVA, FL 33920 US**FEI Number:** 86-1643610**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REGISTERED AGENT SOLUTIONS, INC.
155 OFFICE PLAZA DR., STE. A
TALLAHASSEE, FL 32301 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	MASTER T
Address	17301 BROADWAY ST. #152
City-State-Zip:	ALVA FL 33920

Title	T
Name	GASS, ROBERT
Address	17301 BROADWAY ST. #152
City-State-Zip:	ALVA FL 33920

Title	D
Name	LOPEZ, ANTHONY
Address	17301 BROADWAY ST. #152
City-State-Zip:	ALVA FL 33920

Title	VP
Name	LOPEZ, ANNA
Address	17301 BROADWAY ST. #152
City-State-Zip:	ALVA FL 33920

Title	S
Name	RAFAEL SOTO, NESTOR
Address	17301 BROADWAY ST. #152
City-State-Zip:	ALVA FL 33920

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: ANTHONY LOPEZ**DIRECTOR****03/02/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date