

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F22000003724

**Entity Name:** AXXES CAPITAL INC.

**Current Principal Place of Business:**

3011 PONCE DE LEON BLVD. SUITE 1420  
CORAL GABLES, FL 33134

**Current Mailing Address:**

3011 PONCE DE LEON BLVD. SUITE 1420  
CORAL GABLES, FL 33134 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 CHIEF ADMINISTRATIVE OFFICER  
Name KAPLAN, ADAM .  
Address 3011 PONCE DE LEON BLVD. SUITE  
1420  
City-State-Zip: CORAL GABLES FL 33134

*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:** KAPLAN , ADAM .

CHIEF ADMINISTRATIVE  
OFFICER

06/07/2023

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

\_\_\_\_\_ Date