

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H27612

**Entity Name:** CHARLIZSA, INC.

**Current Principal Place of Business:**

889 U.S. 41 BYPASS S  
VENICE, FL 34285

**Current Mailing Address:**

889 U.S. 41 BYPASS S  
VENICE, FL 34285 US

**FEI Number:** 59-2484628

**Certificate of Status Desired:** No

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

MONTGOMERY, LIZSA  
889 U.S. 41 BYPASS S  
VENICE, FL 34285 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            PRESIDENT  
Name            MONTGOMERY, LIZSA  
Address         889 U.S. 41 BYPASS SOUTH  
City-State-Zip: VENICE FL 34285

*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:** LIZSA MONTGOMERY

PRESIDENT

01/07/2020

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

\_\_\_\_\_ Date