

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000073791

**Entity Name:** CUSTOM MOSAICS, INC.

**Current Principal Place of Business:**

11110 W. OAKLAND PARK BLVD.  
SUITE 233  
SUNRISE, FL 33351

**Current Mailing Address:**

11110 W. OAKLAND PARK BLVD.  
SUITE 233  
SUNRISE, FL 33351

**FEI Number:** 65-1031608

**Certificate of Status Desired:** No

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

STEPHENS, JOE  
14878 SW 33 ST  
DAVIE, FL 33331 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            STEPHENS, JOE  
Address        14878 SW 33 ST  
City-State-Zip: DAVIE FL 33331

Title            VP  
Name            STEPHENS, CHERYL  
Address        14878 SW 33 STREET  
City-State-Zip: DAVIE FL 33331

*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:** CHERYL STEPHENS

VP

04/04/2023

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

\_\_\_\_\_  
Date