#### 2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# P07000079053

Entity Name: ATLANTIC PACIFIC TARIFFS, INC.

### **Current Principal Place of Business:**

10111 NW 24TH PLACE SUITE: 408 SUNRISE , FL 33322-6886

## **Current Mailing Address:**

10111 NW 24TH PLACE SUITE: 408 SUNRISE , FL 33322-6886 US

### FEI Number: 14-2004049

### Name and Address of Current Registered Agent:

LARENAS, PIERRE M 10111 NW 24TH PLACE SUITE: 408 SUNRISE , FL 33322-6886 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	E: PIERRE M LARENAS			04/04/2023
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	CHAIRMAN	Title	PRESIDENT	
Name	LARENAS, PIERRE M	Name	LARENAS, MAURICIO T	
Address	10111 NW 24TH PLACE SUITE: 408	Address City-State-Zip:	3974 NIGHTHAWK DRIVE WESTON FL 33331	
City-State-Zip: Title Name	SUNRISE FL 33322-6886 TREASURER LARENAS, MAURICIO T	Title Name	SECRETARY LARENAS, LINDA F	
Address	3974 NW NIGHTHAWK DRIVE	Address	10111 NW 24 PLACE SUITE 408	
City-State-Zip:	WESTON FL 33331	City-State-Zip:	SUNRISE FL 33322	
Title	V.P.			
Name	LARENAS, LINDA F			
Address	10111 NW 24TH PLACE SUITE: 408			
City-State-Zip:	SUNRISE FL 33322-6886			

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.

**CHAIRMAN** 

#### SIGNATURE: PIERRE M LARENAS

Electronic Signature of Signing Officer/Director Detail

# FILED Apr 04, 2023 Secretary of State 5971570785CC

Certificate of Status Desired: No

04/04/2023 Date