

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000041115

**Entity Name:** LOCAL SERVICE FL, INC.

**Current Principal Place of Business:**

8865 COMMODITY CIR  
13-102  
ORLANDO, FL 32819

**Current Mailing Address:**

8865 COMMODITY CIR  
13 102  
ORLANDO, FL 32819 US

**FEI Number:** 27-2558785

**Certificate of Status Desired:** Yes

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

SASON, VERED  
6330 HIDDEN DALE AVENUE  
ORLANDO, FL 32819 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            SASON, VERED  
Address        6330 HIDDEN DALE AVENUE  
City-State-Zip: ORLANDO FL 32819

Title            V  
Name            PARIYENTE, SHAUL  
Address        6330 HIDDEN DALE AVENUE  
City-State-Zip: ORLANDO FL 32819

*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:** VERED SASON

**OWNER**

**03/05/2024**

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

\_\_\_\_\_  
Date