

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000107791

**FILED**  
**Apr 05, 2019**  
**Secretary of State**  
**2122162357CC**

**Entity Name:** DEP SOURCE SOLUTIONS INC.

**Current Principal Place of Business:**

1723 W PALMETTO STREET  
TAMPA, FL 33607

**Current Mailing Address:**

1723 W PALMETTO STREET  
TAMPA, FL 33607 US

**FEI Number:** 27-0154560

**Certificate of Status Desired:** No

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

PYLE, ERICA L  
1723 W PALMETTO STREET  
TAMPA, FL 33607 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 PYLE, DOUGLAS E  
Address 1723 W PALMETTO STREET  
City-State-Zip: TAMPA FL 33607

Title VP  
Name PYLE, ERICA L  
Address 1723 W PALMETTO STREET  
City-State-Zip: TAMPA FL 33607

*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:** ERICA PYLE

VP

04/05/2019

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

\_\_\_\_\_  
Date