

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000036284

**Entity Name:** SURGE DISASTER SOLUTIONS, INC.

**Current Principal Place of Business:**

10551 SW 103 AVE  
MIAMI, FL 33176

**Current Mailing Address:**

10551 SW 103 AVE  
MIAMI, FL 33176 UN

**FEI Number:** 46-5591583

**Certificate of Status Desired:** No

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

FLORIDA REGISTERED AGENT  
2975 BEE RIDGE ROAD  
SUITE C3  
SARASOTA, FL 34239 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 VP, CFO  
Name FASCO, FRANCIS  
Address 174 SPECIALTY POINT  
City-State-Zip: SANFORD FL 32771

Title PRESIDENT  
Name NEEL, JEREMY S  
Address 174 SPECIALTY POINT  
City-State-Zip: SANFORD FL 32771

*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:** FRANCIS FASCO

**PRESIDENT**

**01/15/2021**

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

\_\_\_\_\_  
Date