

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000087890

**Entity Name:** SOUTH FLORIDA APPLIANCE #6, INC.

**Current Principal Place of Business:**

830 W 84TH ST  
HIALEAH, FL 33014

**Current Mailing Address:**

1890 W 4TH AVE  
HIALEAH, FL 33010

**FEI Number:** 47-5432749

**Certificate of Status Desired:** No

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

NOVALES, JUSTEN  
1890 W 4TH AVE  
HIALEAH, FL 33010 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:** JUSTEN NOVALES

02/09/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PST  
Name NOVALES, JUSTEN ROALD  
Address 1890 W 4TH AVE  
City-State-Zip: HIALEAH FL 33010

Title VPST  
Name NOVALES, ROALD  
Address 1890 W 4TH AVE  
City-State-Zip: HIALEAH FL 33010

Title COO  
Name NOVALES, EILEEN  
Address 1890 W 4TH AVE  
City-State-Zip: HIALEAH FL 33010

Title D  
Name NOVALES, JACOB ROALD  
Address 1890 W 4TH AVE  
City-State-Zip: HIALEAH FL 33010

Title D  
Name NOVALES, JULIAN ROALD  
Address 1890 W 4TH AVE  
City-State-Zip: HIALEAH FL 33010

*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:** JUSTEN R NOVALES

PST

02/09/2024

Electronic Signature of Signing Officer/Director Detail

Date