

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000102361

**Entity Name:** 727 ACCOUNTING INC.

**Current Principal Place of Business:**

140 S OXFORD DR  
ENGLEWOOD, FL 34223

**Current Mailing Address:**

140 S OXFORD DR  
ENGLEWOOD, FL 34223 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

CREAMER, MIKE  
140 S OXFORD DR  
ENGLEWOOD, FL 34223 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            DIR  
Name            CREAMER, MIKE  
Address        140 S OXFORD DR  
City-State-Zip: ENGLEWOOD FL 34223

Title            DIRECTOR  
Name            CREAMER, MIKE  
Address        140 S OXFORD DR  
City-State-Zip: ENGLEWOOD FL 34223

*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:** MIKE CREAMER

**PRESIDENT**

**04/27/2023**

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

\_\_\_\_\_  
Date