### 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.

PRESIDENT

## SIGNATURE: MARTIN L PHILLIPS

Electronic Signature of Signing Officer/Director Detail

#### 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

# DOCUMENT# P18000064398

# **Entity Name: SAPPHIRE BUSINESS SOLUTIONS CORPORATION**

#### **Current Principal Place of Business:**

5840 RED BUG LAKE ROAD 1537 WINTER SPRINGS, FL 32708

#### **Current Mailing Address:**

5840 RED BUG LAKE ROAD 1537 WINTER SPRINGS, FL 32708

#### FEI Number: 83-1379326

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

PHILLIPS, MARTIN L 5840 RED BUG LAKE ROAD 1537 WINTER SPRINGS, FL 32708 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

#### **Officer/Director Detail :**

Title	Р
Name	PHILLIPS, MARTIN L
Address	5840 RED BUG LAKE ROAD
City-State-Zip:	WINTER SPRINGS FL 32708

FILED Feb 13, 2019 Secretary of State 6382755292CC

Certificate of Status Desired: Yes

02/13/2019 Date

Date