2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P19000021840

Entity Name: I LUV SWEET TREATS, INC.

Current Principal Place of Business:

4011 N PINE ISLAND RD APT #401

SUNRISE, FL 33351

Current Mailing Address:

4011 N PINE ISLAND RD **APT #401**

SUNRISE, FL 33351 US

FEI Number: 47-1579884 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

WILES, DEMARY 4011 N. PINE ISLAND RD **APT 401** SUNRISE, FL 33351 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

FILED Apr 30, 2022

Secretary of State

2281347415CC

Officer/Director Detail:

Title Title Ρ

WILES, DEMARY WILES, DEMARY Name Name

4011 N. PINE ISLAND RD 4011 N. PINE ISLAND RD Address Address

APT 401 APT 401

City-State-Zip: SUNRISE FL 33351 City-State-Zip: SUNRISE FL 33351

Title Р Title Ρ

Name WILES, DEMARY Name WILES, DEMARY

Address 4011 N. PINE ISLAND RD Address 4011 N. PINE ISLAND RD

APT 401 APT 401

City-State-Zip: SUNRISE FL 33351 City-State-Zip: SUNRISE FL 33351

Title Title

WILES, DEMARY Name WILES, DEMARY Name

4011 N. PINE ISLAND RD 4011 N. PINE ISLAND RD Address Address **APT 401**

APT 401

City-State-Zip: SUNRISE FL 33351 City-State-Zip: SUNRISE FL 33351

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: DEMARY WILES **OWNER** 04/30/2022 Date