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.

OWNER

SIGNATURE: JOSE MESTRES

DOCUMENT# P19000094201 Entity Name: STRUCTURED ACCOUNTING SOLUTIONS, INC.

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

22 N GRAHAM AVENUE UNIT 1 ORLANDO, FL 32803

Current Mailing Address:

22 N GRAHAM AVE APT 1 ORLANDO, FL 32803 US

FEI Number: 84-4166280

Name and Address of Current Registered Agent:

INFANTE, ALFREDO 677 NE 68 ST MIAMI, FL 33138 US

Title

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: ALFREDO INFANTE 04/21/2023 Date Electronic Signature of Registered Agent **Officer/Director Detail :** OWNER Title CFO MESTRES, JOSE L MESTRES, JOSE LUIS Name Name 22 N GRAHAM AVE Address Address 22 N GRAHAM AVENUE UNIT 1 UNIT 1 City-State-Zip: ORLANDO FL 32803 ORLANDO FL 32803 City-State-Zip:

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: Yes

| Apr 21, 2023 |
|--------------------|
| API 21, 2020 |
| Secretary of State |
| Decretary of Otale |
| 7347505852CC |
| 134130303200 |
| |

FILED

04/21/2023

Date