

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P20000008020

**Entity Name:** 222 SERVICES INC

**Current Principal Place of Business:**

10350 CITY CENTER BLVD  
APT 103  
PEMBROKE PINES, FL 33025

**Current Mailing Address:**

10350 CITY CENTER BLVD  
APT 103  
PEMBROKE PINES, FL 33025 US

**FEI Number:** 84-4369774

**Certificate of Status Desired:** No

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

REYTOR, ANAKARLA  
5167 SW 8 ST  
CORAL GABLES, FL 33134 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           | P                        | Title           | VP                        |
| Name            | ARANGUREN BRAVO, GENESIS | Name            | ARANGUREN BRAVO, VERONICA |
| Address         | 4910 TANYA LEE CIR       | Address         | 4910 TANYA LEE CIR        |
| City-State-Zip: | DAVIE FL 33328           | City-State-Zip: | DAVIE FL 33328            |

*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:** ARANGUREN BRAVO GENESIS

VERONICA ARANGUREN 05/01/2021

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

\_\_\_\_\_  
Date