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.

DIRECTOR

SIGNATURE: ABRAAO GOMES MARTINS

Electronic Signature of Signing Officer/Director Detail

City-State-Zip: DEERFIELD BEACH FL 33064 City-State-Zip: DEERFIELD BEACH FL 33064

SIGNATURE:

Officer/Director Detail :			
Title	Ρ	Title	VP
Name	GOMES MARTINS, ABRAAO	Name	FERREIRA DA SILVA, MILKA
Address	4922 NW 2ND TER	Address	4922 NW 2ND TER
o., o, , <del>,</del> ,		City Chata Zing	

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.

### 5561 LAKESIDE DRIVE # 202 MARGATE, FL 33063 US

Electronic Signature of Registered Agent

Name and Address of Current Registered Agent:

112

**Current Mailing Address:** 3880 LYONS RD

DEERFIELD BEACH, FL 33073 US

## FEI Number: 93-3360816

SDL TRUST CONSULTING CORP

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P23000064523

Entity Name: A & M DIVERSE SOLUTIONS, CORP.

# **Current Principal Place of Business:**

4922 NW 2ND TER DEERFIELD BEACH. FL 33064

FILED May 01, 2024 Secretary of State 8512514902CC

Date

Certificate of Status Desired: Yes

05/01/2024