

**2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000085422

**Entity Name:** IMPACT COMPUTERS AND ELECTRONICS, INC.

**Current Principal Place of Business:**

4151 N 29TH AVE  
HOLLYWOOD, FL 33020

**Current Mailing Address:**

4151 N 29TH AVE  
HOLLYWOOD, FL 33020 US

**FEI Number:** 65-0618530

**Certificate of Status Desired:** No

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

SALAUES, RAFAEL  
4151 N 29TH AVE  
HOLLYWOOD, FL 33020 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 PD  
Name SALAUES, RAFAEL  
Address 4151 N 29TH AVE  
STE 101  
City-State-Zip: HOLLYWOOD FL 33020

Title CEO, VP, DIRECTOR  
Name SALAUES, DANIELA  
Address 4151 N 29TH AVE  
City-State-Zip: HOLLYWOOD FL 33020

Title VP, SECRETARY, DIRECTOR  
Name SALAUES, DAVID  
Address 4151 N 29TH AVE  
City-State-Zip: HOLLYWOOD FL 33020

Title CFO, CHAIRMAN, DIRECTOR  
Name SALAUES, ORIETTA  
Address 4151 N 29TH AVE  
City-State-Zip: HOLLYWOOD FL 33020

*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: RAFAEL SALAUES**

**PRESIDENT**

**06/10/2025**

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

\_\_\_\_\_  
Date