

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000088983

**Entity Name:** KASSEL'S APPLIANCE & A/C REPAIR INC.

**Current Principal Place of Business:**

1635 LAND O LAKES BLVD  
SUITE 1  
LUTZ, FL 33549

**Current Mailing Address:**

1635 LAND O LAKES BLVD  
SUITE 1  
LUTZ , FL 33549 US

**FEI Number:** 59-3599376

**Certificate of Status Desired:** No

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

BRACE, RONALD E  
19925 WINDMILL CIR.  
ODESSA, FL 33556 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            PRES  
Name            KASSEL, WILLIAM  
Address        7803 WINDWARD WAY  
City-State-Zip: TAMPA FL 33556

*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:** WILLIAM KASSEL

**OWNER**

**03/15/2021**

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

\_\_\_\_\_  
Date