

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# V50137

**Entity Name:** LEGACY DWA, INC.

**Current Principal Place of Business:**

1569 EUCLID AVENUE, APT. 5  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

1569 EUCLID AVENUE, APT. 5  
MIAMI BEACH, FL 33139 US

**FEI Number:** 65-0343713

**Certificate of Status Desired:** No

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

WOOD, DOUGLAS  
1569 EUCLID AVENUE, APT.5  
MIAMI BEACH, FL 33139 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  
Name WOOD, DOUGLAS  
Address 1569 EUCLID AVENUE, #5  
City-State-Zip: MIAMI BEACH FL 33139

Title S  
Name BOYER, KENNETH  
Address 161 SHADOW WAY  
City-State-Zip: MIAMI SPRINGS FL 33166

*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:** DOUGLAS WOOD

**PRESIDENT**

**02/08/2024**

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

\_\_\_\_\_  
Date