

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000220825

Entity Name: ON TIME LOGISTICS CHARTERING LLC**Current Principal Place of Business:**934 SPRING CIRCLE
SUITE 103
DEERFIELD BEACH, FL 33441**Current Mailing Address:**934 SPRING CIRCLE
SUITE 103
DEERFIELD BEACH, FL 33441 US**FEI Number:** 47-3597683**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ARAPE, JONATHAN
934 SPRING CIRCLE
SUITE 103
DEERFIELD BEACH, FL 33441 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**Authorized Person(s) Detail :**Title MGR
Name ARAPE, JONATHAN
Address 934 SPRING CIRCLE
SUITE 103
City-State-Zip: DEERFIELD BEACH FL 33441Title MGR
Name ARAPE, BEATRIZ
Address 934 SPRING CIRCLE
SUITE 103
City-State-Zip: DEERFIELD BEACH FL 33441Title MGR
Name DE LA BLANCA, ELIZABETH
Address 934 SPRING CIRCLE
SUITE 103
City-State-Zip: DEERFIELD BEACH FL 33441Title MGR
Name ARAPE, KHARELLY
Address 934 SPRING CIRCLE
SUITE 103
City-State-Zip: DEERFIELD BEACH FL 33441

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ARAPE , JONATHAN

MGR

04/28/2021

Electronic Signature of Signing Authorized Person(s) Detail_____
Date