

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000113252

Entity Name: C3LS, INC.

**Current Principal Place of Business:**

1700 NW 64 STREET  
SUITE 700  
FORT LAUDERDALE, FL 33309

**Current Mailing Address:**

1700 NW 64 STREET  
SUITE 700  
FORT LAUDERDALE, FL 33309 US

FEI Number: 16-1636718

Certificate of Status Desired: No

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

ROZIO, ALBERTO  
1700 NW 64 STREET  
SUITE 700  
FORT LAUDERDALE, FL 33309 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 DIRECTOR  
Name WEISE, TED  
Address 1700 NW 64 STREET  
SUITE 700  
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR  
Name MARTIN, JAMES  
Address 1700 NW 64 STREET  
SUITE 700  
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR  
Name LOSCHIAVO, ROD  
Address 1700 NW 64 STREET  
SUITE 700  
City-State-Zip: FORT LAUDERDALE FL 33309

Title COO  
Name ROZIO, ALBERTO  
Address 1700 NW 64 STREET  
SUITE 700  
City-State-Zip: FORT LAUDERDALE FL 33309

Title PTSE  
Name ROZIO, ALBERTO  
Address 1700 NW 64 STREET  
SUITE 700  
City-State-Zip: FORT LAUDERDALE FL 33309

*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: ALBERTO ROZIO

COO

01/27/2021

Electronic Signature of Signing Officer/Director Detail

Date