# 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

MR.

SIGNATURE: MICHAEL JOHN BARRETT

Electronic Signature of Signing Officer/Director Detail

# SIGNATURE: PILAR LEONE RYAN CREW

Officer/Director Detail :				
	Title	DIRECTOR	Title	DIR
	Name	BARRETT, MICHAEL JOHN	Name	ORTIZ, KEVIN SAMUEL
	Address	4703 MILNE DR	Address	168 MEADOW BROOK LN
	City-State-Zip:	TORRANCE CA 90505	City-State-Zip:	SAN BENITO TX 78586
	Title	SECRETARY	Title	SECRETARY
	Name	TAKASHIMA, GUY HARUO	Name	CREW, PILAR LEONE RYAN
	Address	4703 MILNE DR	Address	4703 MILNE DR
	City-State-Zip:	TORRANCE CA 90505	City-State-Zip:	TORRANCE CA 90505

# Electronic Signature of Registered Agent

## Name and Address of Current Registered Agent:

CREW, PILAR LEONE RYAN 4125 W WATERS AVE TAMPA, FL 33614 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.

Entity Name: TRANSFORMATION PROGRAM USA INC

### **Current Principal Place of Business:**

4125 W WATERS AVE TAMPA, FL 33614

# **Current Mailing Address:**

4703 MILNE DR TORRANCE, CA 90505 US

# FEI Number: 81-3971501

### 2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT# N1600009389

Certificate of Status Desired: Yes

FILED Mar 18, 2021 Secretary of State 1116971819CC

> 03/18/2021 Date

03/18/2021 Date