

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N18000004469

**Entity Name:** MIZUCON, INC.**Current Principal Place of Business:**1365 NE 105TH ST #5  
MIAMI SHORES, FL 33138**Current Mailing Address:**1365 NE 105TH ST #5  
MIAMI SHORES, FL 33138 US**FEI Number:** 82-5344172**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TUCKER, TRISTAN  
1365 NE 105TH ST #5  
MIAMI SHORES, FL 33138 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:** TRISTAN TUCKER

02/24/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	P/D
Name	TUCKER, TRISTAN
Address	1365 NE 105TH ST #5
City-State-Zip:	MIAMI SHORES FL 33138

Title	S/D
Name	EASTON, KAYLA
Address	8514 DAMACUS DR
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	T/D
Name	BAAR, CHRISTOPHER
Address	1225 RIVERSIDE DR, APT 102
City-State-Zip:	CORAL SPRINGS FL 33071

Title	DIRECTOR
Name	JOHNSON, STEPHANIE LEIGH-CONE
Address	11251 SW 157TH ST
City-State-Zip:	MIAMI FL 33157

Title	DIRECTOR
Name	KIM, JOSEPH
Address	5593 BOYNTON RISE LN
City-State-Zip:	BOYNTON BEACH FL 33437

Title	DIRECTOR
Name	KOESTERS, JESSICA
Address	5182 NW 87TH TERR
City-State-Zip:	LAUDERHILL FL 33351

Title	DIRECTOR
Name	DORCH, BRITTANY
Address	14401 HANGING MOSS CIRCLE APT 102
City-State-Zip:	TAMPA FL 33613

*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.*

**SIGNATURE:** TRISTAN TUCKER

PRESIDENT

02/24/2021

Electronic Signature of Signing Officer/Director Detail

Date