

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000005835

Entity Name: THE GBARADI CORPORATION**Current Principal Place of Business:**11 ROBERT SMALLS PKWY
4582
BEAUFORT, SC 29906**Current Mailing Address:**11 ROBERT SMALLS PKWY
4582
BEAUFORT, SC 29906 US**FEI Number:** 83-1775871**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**QUINQUE, LLC
8507 NW 12TH AVE
MIAMI, FL 33150 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 | CHAIRMAN |
| Name | QUINQUE LLC |
| Address | 11 ROBERT SMALLS PKWY 4582 |
| City-State-Zip: | BEAUFORT SC 29906 |

| | |
|-----------------|-------------------------------|
| Title | CEO |
| Name | MILES, C.A. |
| Address | 11 ROBERT SMALLS PKWY 4582 |
| City-State-Zip: | BEAUFORT SC 29906 |

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|-----------------|-------------------------------|
| Title | COO |
| Name | MCFADZEAN, J. A. DR. |
| Address | 11 ROBERT SMALLS PKWY 4582 |
| City-State-Zip: | BEAUFORT SC 29906 |

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|-----------------|-------------------------------|
| Title | CFO |
| Name | WATSON, C. S. |
| Address | 11 ROBERT SMALLS PKWY 4582 |
| City-State-Zip: | BEAUFORT SC 29906 |

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|-----------------|-------------------------------|
| Title | CHAIRMAN |
| Name | MILES, K. A. |
| Address | 11 ROBERT SMALLS PKWY 4582 |
| City-State-Zip: | BEAUFORT SC 29906 |

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|-----------------|-------------------------------|
| Title | VICE CHAIRMAN |
| Name | THOMAS, L. L. |
| Address | 11 ROBERT SMALLS PKWY 4582 |
| City-State-Zip: | BEAUFORT SC 29906 |

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|-----------------|-------------------------------|
| Title | INVESTMENT OFFICER |
| Name | BROWN, J. L. |
| Address | 11 ROBERT SMALLS PKWY 4582 |
| City-State-Zip: | BEAUFORT SC 29906 |

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: QUINQUE LLC**MAJORITY
SHAREHOLDER****04/14/2024**_____
Electronic Signature of Signing Officer/Director Detail_____
Date