# 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: SCOTT BORTZ

Electronic Signature of Signing Officer/Director Detail

# 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F55939

Entity Name: PLUSCO SUPPLY CORP.

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

6350 EAST ROGERS CIRCLE BOCA RATON. FL 33487

## **Current Mailing Address:**

6350 EAST ROGERS CIRCLE BOCA RATON, FL 33487

## FEI Number: 59-2142676

## Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

BORTZ, SCOTT 6350 EAST ROGERS CIRCLE BOCA RATON, FL 33487 US

**Officer/Director Detail :** MD

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.

Title

Ρ

#### SIGNATURE:

Title

Name	BORTZ, SCOTT	Name	BORTZ, SHARON
Address	6350 E. ROGERS CIRCLE	Address	2188 NW 62ND DR
City-State-Zip:	BOYNTON BEACH FL 33436	City-State-Zip:	BOCA RATON FL 33496

Certificate of Status Desired: No

Mar 01, 2019 Secretary of State 8199419643CC

Date

FILED

03/01/2019 Date

MD