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: KEVIN K SMITH

Electronic Signature of Signing Officer/Director Detail

P.O. BOX 2254

ORLANDO FL 32802

Address

City-State-Zip:

Date

Certificate of Status Desired: No

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:

Address

Officer/Direc	tor Detail :		
Title	DPS	Title	Т
Name	SMITH, W. KELLY	Name	SMITH, KEVIN K

DOCUMENT# K40279		
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2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: WKS CONVENTIONS, INC.

Current Principal Place of Business:

301 E. PINE STREET SUITE 750 ORLANDO, FL 32801

Current Mailing Address:

P.O. BOX 2254 ORLANDO, FL 32802 US

FEI Number: 59-2913595

Name and Address of Current Registered Agent:

P.O. BOX 2254

City-State-Zip: ORLANDO FL 32802

Electronic Signature of Registered Agent

SMITH, KEVIN K 301 E. PINE STREET SUITE 750 ORLANDO, FL 32801 US FILED Apr 04, 2023 Secretary of State 9413273838CC

04/04/2023

Date