

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000125143

Entity Name: HRUSTIC' BROTHERS, INC.**Current Principal Place of Business:**6498 FAYAL DR S
SUITE 1
JACKSONVILLE, FL 32258**Current Mailing Address:**PO BOX 16952
JACKSONVILLE, FL 32245-6952 US**FEI Number:** 61-1459051**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HRUSTIC, EMIR
6498 FAYAL DR S
SUITE 1
JACKSONVILLE, FL 32258 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	PST
Name	HRUSTIC, HUSEIN
Address	6498 FAYAL DR S SUITE 1
City-State-Zip:	JACKSONVILLE FL 32258

Title	VP
Name	HRUSTIC, AJISA
Address	6498 FAYAL DR S SUITE 1
City-State-Zip:	JACKSONVILLE FL 32258

Title	DIRECTOR
Name	HRUSTIC, EMIR
Address	6498 FAYAL DR S SUITE 1
City-State-Zip:	JACKSONVILLE FL 32258

Title	DIRECTOR
Name	HRUSTIC, ELVIS
Address	6498 FAYAL DR S SUITE 1
City-State-Zip:	JACKSONVILLE FL 32258

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: EMIR HRUSTIC

RA

06/15/2020

Electronic Signature of Signing Officer/Director Detail_____
Date