### 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.

PD

SIGNATURE: CHARLES PENCE

Electronic Signature of Signing Officer/Director Detail

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

#### **Officer/Director Detail :**

Title	PD	Title	VP
Name	PENCE, CHARLES	Name	PENCE, BAMBI
Address	715 NE 45 STREET	Address	715 NE 45 STREET
City-State-Zip:	OAKLAND PARK FL 33334	City-State-Zip:	OAKLAND PARK FL 33334

### 2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000049114

### Entity Name: PENCE SEALCOATING CORPORATION

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

**715 NE 45 STREET** OAKLAND PARK, FL 33334

#### **Current Mailing Address:**

**715 NE 45 STREET** OAKLAND PARK. FL 33334

#### FEI Number: 80-0610487

# Name and Address of Current Registered Agent:

PENCE, CHARLES 715 N.E. 45TH STREET OAKLAND PARK, FL 33334 US

Date

Certificate of Status Desired: No

01/25/2022 Date