

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000103494

Entity Name: 3592-9272 FLORIDA INC.**Current Principal Place of Business:**C/O KEVIN BOIVIN
1295 DES CASCADES
SAINT-HYACINTHE, QC J2S 3-H2**Current Mailing Address:**C/O KEVIN BOIVIN
1295 DES CASCADES
SAINT-HYACINTHE, QC J2S 3-H2 CA**FEI Number:** 46-1908784**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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	P
Name	DAIGNEAULT, FRANCOIS
Address	525 DE LA FALAISE
City-State-Zip:	MONT SAINT HILAIRE QC J3H 5-R6

Title	VP/S
Name	BOIVIN, KEVIN
Address	265 CHEMIN DES PATRIOTES SUD
City-State-Zip:	MONT SAINT HILAIRE QC J3H 3-G5

Title	DIR
Name	DAIGNEAULT, FRANCOIS
Address	525 DE LA FALAISE
City-State-Zip:	MONT SAINT HILAIRE QC J3H 5-R6

Title	DIR
Name	BOIVIN, KEVIN
Address	265 CHEMIN DES PATRIOTES SUD
City-State-Zip:	MONT SAINT HILAIRE QC J3H 3-G5

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: FRANCOIS DAIGNEAULT**PRESIDENT****01/22/2020**

Electronic Signature of Signing Officer/Director Detail

Date