FEI Number: APPLIED FOR			Certificate of Status Desired: No	
Name and Address of Current Registered Agent:				
GREENE, JAMES DIII 6222 129TH RD. LIVE OAK, FLI 32060 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: JAMES D. GREENE				04/29/2021
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	P	Title	S/T	
Name	GREENE, JAMES D III	Name	ROBINSON, VICTOR	
Address	6222 129TH RD.	Address	4115 CASTELLAN DR.	
City-State-Zip:	LIVE OAK FL 32060	City-State-Zip:	TALLAHASSEE FL 32308	

**Current Mailing Address:** 

6222 129TH RD. LIVE OAK, FL 32060

DOCUMENT# P17000091661

Entity Name: PHANTOM FUSION, INC.

**Current Principal Place of Business:** 

6222 129TH RD. LIVE OAK, FL 32060

# FEI Number: APPI IFD FOR

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### 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.

S/T

#### SIGNATURE: VICTOR ROBINSON

Electronic Signature of Signing Officer/Director Detail

FILED Apr 29, 2021 Secretary of State 4868615282CC

04/29/2021

Date

## 2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT