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: ALFREDO FRASSINO

Electronic Signature of Signing Officer/Director Detail

# Electronic Signature of Registered Agent

Officer/Director Detail :					
Title	P	Title	VP		
Name	FRASSINO, ALFREDO	Name	FRASSINO, MARIA JOSE		
Address	16057 MANGROVE RD	Address	16057 MANGROVE RD		
City-State-Zip:	WINTER GARDEN FL 34787	City-State-Zip:	WINTER GARDEN FL 34787		

### SIGNATURE:

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.

### 16057 MANGROVE RD WINTER GARDEN, FL 34787 US

**Current Mailing Address:** 

DOCUMENT# P19000055745

16057 MANGROVE RD WINTER GARDEN. FL 34787

Entity Name: FRASSINO GROUP CORP

**Current Principal Place of Business:** 

# FEI Number: 84-2482774

Name and Address of Current Registered Agent: FRASSINO, ALFREDO 16057 MANGROVE RD WINTER GARDEN, FL 34787 US

## 2023 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

Certificate of Status Desired: No

Date

02/10/2023 Date

FILED Feb 10, 2023 Secretary of State 2678230494CC

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