

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P21000095505

Entity Name: WHOLE FACTOR INC**Current Principal Place of Business:**3208 LAMANGA DR
MELBOURNE, FL 32940**Current Mailing Address:**3208 LAMANGA DR
MELBOURNE, FL 32940 US**FEI Number:** 87-3434450**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SINGH, RAVNEET I
3208 LAMANGA DR
MELBOURNE, FL 32940 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 | PD |
| Name | GARCHA, TARLOCHAN S |
| Address | 19701 YOSEMITE CIR |
| City-State-Zip: | NORTHRIDGE CA 91326 |

| | |
|-----------------|-----------------|
| Title | VPD |
| Name | SODHI, FATEH S |
| Address | 2714 ALMOND AVE |
| City-State-Zip: | SANGER CA 93657 |

| | |
|-----------------|---------------------|
| Title | TD |
| Name | GARCHA, GURJIT K |
| Address | 19701 YOSEMITE CIR |
| City-State-Zip: | NORTHRIDGE CA 91326 |

| | |
|-----------------|--------------------|
| Title | SD |
| Name | SINGH, RAVNEET I |
| Address | 3208 LAMANGA DR |
| City-State-Zip: | MELBOURNE FL 32940 |

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: RAVNEET SINGH**SECRETARY****04/20/2022**

Electronic Signature of Signing Officer/Director Detail

Date