

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 844009

Entity Name: TRANSFRESH CORPORATION**Current Principal Place of Business:**4757 THE GROVE DRIVE
SUITE 260
WINDERMERE, FL 34786**Current Mailing Address:**4757 THE GROVE DRIVE
SUITE 260
WINDERMERE, FL 34786 US**FEI Number:** 94-1620943**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S. 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	SECRETARY
Name	HOWLAND, BARBARA
Address	4757 THE GROVE DRIVE SUITE 260
City-State-Zip:	WINDERMERE FL 34786

Title	VP, ADMINISTRATION & FINANCE
Name	SANTOS, DARCILO
Address	4757 THE GROVE DRIVE SUITE 260
City-State-Zip:	WINDERMERE FL 34786

Title	DIRECTOR, PRESIDENT
Name	OLIVO, JOHN
Address	4757 THE GROVE DRIVE SUITE 260
City-State-Zip:	WINDERMERE FL 34786

Title	DIRECTOR
Name	KNOBLOCH, SASCHA
Address	25 PARK LANE 3RD FLOOR
City-State-Zip:	LONDON W1K1RA

Title	VP, CHIEF FINANCIAL OFFICER AND TREASURER
Name	ATTAR, ALBERTO
Address	4757 THE GROVE DRIVE SUITE 260
City-State-Zip:	WINDERMERE FL 34786

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: BARBARA HOWLAND**SECRETARY****03/01/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date