

2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000000078

Entity Name: MASTERTASTE INC.**Current Principal Place of Business:**3400 MILLINGTON RD
BELOIT, WI 53511**Current Mailing Address:**3400 MILLINGTON RD
BELOIT, WI 53511 US**FEI Number:** 54-2081648**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT 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	DIRECTOR
Name	MUNNELLY, ELIZABETH
Address	3400 MILLINGTON RD
City-State-Zip:	BELOIT WI 53511

Title	VP
Name	MUNNELLY, ELIZABETH
Address	3400 MILLINGTON RD
City-State-Zip:	BELOIT WI 53511

Title	CFO
Name	MUNNELLY, ELIZABETH
Address	3400 MILLINGTON RD
City-State-Zip:	BELOIT WI 53511

Title	SECRETARY
Name	MUNNELLY, ELIZABETH
Address	3400 MILLINGTON RD
City-State-Zip:	BELOIT WI 53511

Title	DIRECTOR
Name	KELLY, OLIVER
Address	3400 MILLINGTON RD
City-State-Zip:	BELOIT WI 53511

Title	PRESIDENT & CEO
Name	KELLY, OLIVER
Address	3400 MILLINGTON RD
City-State-Zip:	BELOIT WI 53511

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: ELIZABETH MUNNELLY**CFO****04/08/2025**_____
Electronic Signature of Signing Officer/Director Detail_____
Date