

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000000920

Entity Name: ZODIAC OF NORTH AMERICA, INC.**Current Principal Place of Business:**540 THOMPSON CREEK RD
STEVENSVILLE, MD 21666**Current Mailing Address:**540 THOMPSON CREEK RD
STEVENSVILLE, MD 21666 US**FEI Number:** 52-0906929**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**INCRP SERVICES, INC.
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470 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	CHAIRMAN
Name	LAURIN, GUILLAUME
Address	540 THOMPSON CREEK RD
City-State-Zip:	STEVENSVILLE MD 21666

Title	CFO
Name	BOUCHER, AGNES
Address	540 THOMPSON CREEK RD
City-State-Zip:	STEVENSVILLE MD 21666

Title	TREASURER
Name	EICHINGER, MICHELLE
Address	540 THOMPSON CREEK RD
City-State-Zip:	STEVENSVILLE MD 21666

Title	MANAGING DIRECTOR
Name	FARRELLY, GEORGE
Address	540 THOMPSON CREEK RD
City-State-Zip:	STEVENSVILLE FL 21666

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: MICHELLE EICHINGER**FINANCIAL CONTROLLER** 02/17/2022_____
Electronic Signature of Signing Officer/Director Detail_____
Date