

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F13000001943

**Entity Name:** REPETE CORPORATION OF WISCONSIN**Current Principal Place of Business:**W226N6283 VILLAGE DR  
SUSSEX, WI 53089**Current Mailing Address:**W226N6283 VILLAGE DR  
SUSSEX, WI 53089 US**FEI Number:** 39-1037971**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BUSINESS FILINGS INCORPORATED  
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:** MARK WILLIAMS

04/08/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name PETERSON, MATTHEW  
Address W226N6283 VILLAGE DR  
City-State-Zip: SUSSEX WI 53089

Title DIRECTOR  
Name PETERSON, LORA  
Address W226N6283 VILLAGE DR  
City-State-Zip: SUSSEX WI 53089

Title PRESIDENT  
Name LEVERETT, WADE  
Address W226N6283 VILLAGE DR  
City-State-Zip: SUSSEX WI 53089

Title SECRETARY  
Name FELTZ, MICHAEL  
Address W226N6283 VILLAGE DR  
City-State-Zip: SUSSEX WI 53089

Title TREASURER  
Name FELTZ, MICHAEL  
Address W226N6283 VILLAGE DR  
City-State-Zip: SUSSEX WI 53089

*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:** WADE LEVERETT

PRESIDENT

04/08/2019

Electronic Signature of Signing Officer/Director Detail

Date