

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13000003799

Entity Name: ICING SMILES, INC.

Current Principal Place of Business:

11418 LAGER BLVD
FULTON, MD 20759

Current Mailing Address:

7500 MONTPELIER ROAD
#345 SUITE 105
LAUREL, MD 20723 US

FEI Number: 27-1158710

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 PRESIDENT, DIRECTOR
Name PYKLES-GEORGE, CHARITY ANNE
Address 8921 MOISAN WAY
City-State-Zip: LA MESA CA 91941

Title SECRETARY, DIRECTOR
Name MCVEIGH, JOHN PAUL
Address 32 LEONE LANE
City-State-Zip: CHESTER NY 10918

Title TREASURER, DIRECTOR
Name CHOW, STEPHANIE
Address 12001 VENTURA BLVD.
 SUITE 622
City-State-Zip: STUDIO CITY CA 91604

Title DIRECTOR
Name SANDRIDGE, JONATHAN GRAY
Address 3030 HEIDELBERG DR
City-State-Zip: BOULDER CO 80305

Title DIRECTOR
Name KASHYAP, ISHITA
Address 96 FIDDLEHEAD CRES
 WATERDOWN
City-State-Zip: HAMILTON ON L8B0Y1

Title DIRECTOR
Name NICHOLS, JOANNA LYNN
Address 2600 WENSLEY DRIVE
City-State-Zip: CHARLOTTE, NC 28210

Title DIRECTOR
Name FOY, REBECCA ANN
Address 10687 29TH STREET NE
City-State-Zip: ST. MICHAEL MN 55376

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: JOHN PAUL MCVEIGH

SECRETARY

03/08/2024

Electronic Signature of Signing Officer/Director Detail

Date