

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F20000002630

**Entity Name:** ABBY DELGOFFE CORP

**Current Principal Place of Business:**

407-A OLD HWY 50  
MINNEOLA, FL 34715

**Current Mailing Address:**

P.O. BOX 1721  
JACKSON , WY 83001 US

**FEI Number: 83-1948645**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

DELGOFFE, ABBY  
407-A OLD HWY 50  
MINNEOLA, FL 34715 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 P  
Name DELGOFFE, ABBY  
Address 819 CHESTNUT ST  
City-State-Zip: CLERMONT FL 34711

*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: ABBY DELGOFFE**

**OWNER**

**01/23/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date