

F23000004783

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

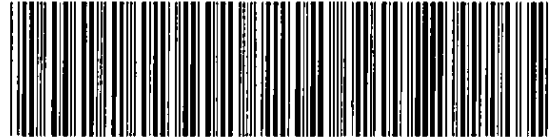
(Business Entity Name)

(Document Number)

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## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: JOHN AGUILAR & COMPANY, INC.

Name of Corporation

DOCUMENT NUMBER: F23000004783

The enclosed *Affidavit by Foreign Corporation to Change/Add Officer(s) and/or Director(s)* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

**DAVID CARR**

Name of Contact Person

**JOHN AGUILAR & COMPANY INC**

Firm/Company

**PO BOX 31450**

Address

**STOCKTON, CA 95213**

City/State and Zip Code

**DAVIDC@SUGARTRUX.COM**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**DAVID CARR**

at ( **209** ) **932.8083**

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for the following amount:

☐ \$35.00 Filing Fee

☒ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee,  
Certificate of Status &  
Certified Copy  
(Additional copy is  
enclosed)

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



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FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**AFFIDAVIT BY FOREIGN CORPORATION TO CHANGE/ADD OFFICER(S)  
AND/OR DIRECTOR(S)**

(Note: Applicable only during the first calendar year of qualification)

1. The name of the foreign corporation as it appears on the records of the Florida Department of State is:  
**JOHN AGUILAR & COMPANY INC**
2. This entity was authorized to transact business in Florida on **08/15/2023** and its Florida document number is **F23000004783**
3. This corporation was formed under the laws of **CALIFORNIA**
4. The name and address of each officer and/or director is as follows:

Title:

**PRES.**

Name and Address

**GREGG WILSON**

**1505 NAVY DRIVE**

**STOCKTON, CA 95206**

**V.P.**

**DENNIS CAREY**

**26715 SANDY ARBOR LN**

**KATY, TX 77494**

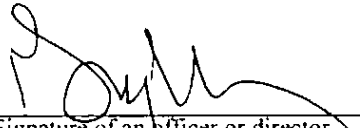
**MGR**

**CHRISTIAN KAHLER**

**1505 NAVY DRIVE**

**STOCKTON, CA 95206**

(Attach additional pages if necessary)

  
Signature of an officer or director

**GREGG WILSON**  
Typed or printed name of person signing

**PRESIDENT**

Title of person signing

**FILING FEE \$35**

Make checks payable to Florida Department of State and Mail to:  
Division of Corporations • PO Box 6327 • Tallahassee, FL 32314