

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 427984

**Entity Name:** BELTRAM EDGE TOOL SUPPLY, INC.

**Current Principal Place of Business:**

11101 NORTH 46TH STREET  
TAMPA, FL 33617

**Current Mailing Address:**

11101 NORTH 46TH STREET  
TAMPA, FL 33617 US

**FEI Number:** 59-1468996

**Certificate of Status Desired:** No

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

COGENCY GLOBAL INC.  
115 NORTH CALHOUN ST  
SUITE 4  
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            CEO  
Name            WHYTE, IAIN  
Address        11101 NORTH 46TH STREET  
City-State-Zip: TAMPA FL 33617

Title            SECRETARY  
Name            GERSHMAN, DAVID  
Address        2811 PONCE DE LEON BLVD  
                 SUITE 400  
City-State-Zip: CORAL GABLES FL 33134

Title            CFO  
Name            LOM, STEVEN  
Address        11101 NORTH 46TH STREET  
City-State-Zip: TAMPA FL 33617

Title            CHAIRMAN, AUTHORIZED  
                 SIGNATORY  
Name            GROSS, JR., JORGE A  
Address        2811 PONCE DE LEON BLVD  
                 SUITE 400  
City-State-Zip: CORAL GABLES FL 33134

Title            ASSISTANT SECRETARY  
Name            CALDERON, MICHELSA  
Address        2811 PONCE DE LEON BLVD  
                 SUITE 400  
City-State-Zip: CORAL GABLES FL 33134

*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:** MICHELSA CALDERON

**ASSISTANT SECRETARY    04/15/2024**

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

\_\_\_\_\_  
Date