# 2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F75507

Entity Name: LAWRENCE FACTOR, INC.

## Current Principal Place of Business:

4790 NW 157 STREET MIAMI LAKES, FL 33014

#### **Current Mailing Address:**

4790 NW 157 STREET MIAMI LAKES, FL 33014 US

# FEI Number: 59-2287373

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

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

# Certificate of Status Desired: No

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

#### **Officer/Director Detail :**

Title	VP	Title	SECRETARY
Name	HETZLER, DAVID	Name	SCHIESL, ANDREW
Address	4790 NW 157 STREET	Address	4790 NW 157 STREET
City-State-Zip:	MIAMI LAKES FL 33014	City-State-Zip:	MIAMI LAKES FL 33014
Title	ASSISTANT SECRETARY	Title	DIRECTOR
Name	SILER, MARK	Name	SCHIESL, ANDREW
Address	4790 NW 157 STREET	Address	4790 NW 157 STREET
City-State-Zip:	MIAMI LAKES FL 33014	City-State-Zip:	MIAMI LAKES FL 33014
Title	DIRECTOR	Title	TREASURER
Title Name	DIRECTOR SCHESKE, MIKE	Title Name	TREASURER JAMESON, HERBERT
Name	SCHESKE, MIKE	Name	JAMESON, HERBERT
Name Address	SCHESKE, MIKE 4790 NW 157 STREET	Name Address	JAMESON, HERBERT 4790 NW 157 STREET
Name Address City-State-Zip:	SCHESKE, MIKE 4790 NW 157 STREET MIAMI LAKES FL 33014	Name Address City-State-Zip:	JAMESON, HERBERT 4790 NW 157 STREET MIAMI LAKES FL 33014
Name Address City-State-Zip: Title	SCHESKE, MIKE 4790 NW 157 STREET MIAMI LAKES FL 33014 ASSISTANT TREASURER	Name Address City-State-Zip: Title	JAMESON, HERBERT 4790 NW 157 STREET MIAMI LAKES FL 33014 PRESIDENT

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: ANDREW SCHIESL

SECRETARY

04/29/2024

Electronic Signature of Signing Officer/Director Detail

Date

# FILED Apr 29, 2024 Secretary of State 5325982058CC

Date