#### 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: SCOTT H BEENE

Electronic Signature of Signing Officer/Director Detail

**Officer/Director Detail :** CEO Title PRESIDENT

Title BEENE, SCOTT H Name Address 101 HAMTOM ROAD City-State-Zip: EIGHTY FOUR PA 15330

Electronic Signature of Registered Agent

Title CBDO Name EASTERS, JOSHUA RYAN Address 11532 BALINTORE DRIVE

City-State-Zip: **RIVERVIEW FL 33579** 

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.

### 1410 NORTH 21ST STREET TAMPA, FL 33605-5313

**Current Mailing Address:** 

1410 NORTH 21ST STREET TAMPA, FL 33605-5313

DOCUMENT# P00000024407

**Current Principal Place of Business:** 

FEI Number: 59-3629959

## Name and Address of Current Registered Agent:

BEENE, SCOTT H 1410 21ST STREET NORTH TAMPA, FL 33605 US

SIGNATURE:

### Certificate of Status Desired: No

Name DAVE, WORK C II Address 1416 SENIOR DRIVE City-State-Zip: PITTSBURGH PA 15227

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

CEO

04/19/2024

FILED Apr 19, 2024 Secretary of State 3366638513CC

Date

Date

# 2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: DIVERSICOM CORPORATION OF RIVERVIEW