128 LIME RO LAKE PLAC	OAD NE ID, FL 33852 US			
FEI Number: 65-1073057			Certificate of Status Desired: Yes	
Name and A	Address of Current Registered Age	nt:		
KIELB, DAVID				
128 LIME ROAI				
128 LIME ROAI LAKE PLACID,		nging its registered office or regis	tered agent, or both, in the State of I	Florida.
128 LIME ROAI LAKE PLACID, The above named	FL 33852 US	nging its registered office or regis	tered agent, or both, in the State of I	
128 LIME ROAI LAKE PLACID, The above named	FL 33852 US d entity submits this statement for the purpose of cha	nging its registered office or regis	tered agent, or both, in the State of I	Florida. 03/05/202 Date
128 LIME ROAI LAKE PLACID, The above named SIGNATURE	FL 33852 US d entity submits this statement for the purpose of chance E: DAVID KIELB	nging its registered office or regis	tered agent, or both, in the State of I	03/05/202
128 LIME ROAI LAKE PLACID, The above named SIGNATURE Officer/Dire	FL 33852 US d entity submits this statement for the purpose of characteristic statement for the purpose of the purpose of characteristic statement for the purpose of characteristic statement for the purpose of characteristic statement for the purpose of the purpose of characteristic statement for the purpose of characteristic statement for the purpose of the	nging its registered office or regis	tered agent, or both, in the State of I	03/05/202
128 LIME ROAI LAKE PLACID, The above named SIGNATURE Officer/Dire Title	 FL 33852 US d entity submits this statement for the purpose of cha E: DAVID KIELB Electronic Signature of Registered Agent ctor Detail : 			03/05/202
128 LIME ROAI LAKE PLACID, The above named SIGNATURE	FL 33852 US d entity submits this statement for the purpose of cha E: DAVID KIELB Electronic Signature of Registered Agent ctor Detail : PCEO	Title	VP	03/05/202

DOCUMENT# P00000093318 Entity Name: AMERI-CON ENTERPRISES, INC.

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

128 LIME ROAD NE LAKE PLACID, FL 33852

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.

PRES

03/05/2023

Electronic Signature of Signing Officer/Director Detail

FILED Mar 05, 2023 Secretary of State 2498447301CC

Date