

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000045005

Entity Name: ADVANCED CNC MANUFACTURING, INC.**Current Principal Place of Business:**2313 DESTINY WAY
ODESSA, FL 33556**Current Mailing Address:**P.O. BOX 991
ODESSA, FL 33556**FEI Number:** 61-1412132**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CARROSSO, MARIA
2313 DESTINY WAY
ODESSA, FL 33556 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	PD
Name	CARROSSO, MIGUEL A
Address	2313 DESTINY WAY
City-State-Zip:	ODESSA FL 33556

Title	D
Name	CARROSSO, MARIA I
Address	2313 DESTINY WAY
City-State-Zip:	ODESSA FL 33556

Title	D
Name	CARROSSO, MARIA G
Address	2313 DESTINY WAY
City-State-Zip:	ODESSA FL 33556

Title	O
Name	CARROSSO, MARIA I
Address	2313 DESTINY WAY
City-State-Zip:	ODESSA FL 33556

Title	OFFICER
Name	CARROSSO, MARIA G
Address	2313 DESTINY WAY
City-State-Zip:	ODESSA FL 33556

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: MARIA CARROSSO**OFFICER****09/03/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date