

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000003860

**Entity Name:** 05, INC.

**Current Principal Place of Business:**

14620 N NEBRASKA AVE  
BLDG D  
TAMPA, FL 33613

**Current Mailing Address:**

14620 N NEBRASKA AVE  
BLDG D  
TAMPA, FL 33613

**FEI Number:** 32-0136443

**Certificate of Status Desired:** No

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

KESSLER, MITCH  
14620 N NEBRASKA AVE  
BLDG D  
TAMPA, FL 33613 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           DPT  
Name           KESSLER, MITCH  
Address        14620 N NEBRASKA AVE BLDG D  
City-State-Zip: TAMPA FL 33613

Title           DVS  
Name           ZIMMS, MIRIAM  
Address        14620 N NEBRASKA AVE BLDG D  
City-State-Zip: TAMPA FL 33613

*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:** MITCH KESSLER

DPT

02/28/2024

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

\_\_\_\_\_  
Date