

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000110338

**Entity Name:** AGRISCAPE, INC.**Current Principal Place of Business:**24208 PRODUCTION CIRCLE  
BONITA SPRINGS, FL 34135**Current Mailing Address:**PO BOX 1882  
BONITA SPRINGS, FL 34135 US**FEI Number:** 20-3272694**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MENDOZA, NICHOLAS  
24208 PRODUCTION CIRCLE  
BONITA SPRINGS, FL 34135 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:** NICHOLAS MENDOZA

01/11/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            MENDOZA, NICHOLAS  
Address        24208 PRODUCTION CIRCLE  
City-State-Zip: BONITA SPRINGS FL 34135

Title            VP  
Name            MENDOZA, SAMUEL  
Address        24208 PRODUCTION CIRCLE  
City-State-Zip: BONITA SPRINGS FL 34135

Title            DIRECTOR  
Name            MENDOZA, GASPAR  
Address        24208 PRODUCTION CIRCLE  
City-State-Zip: BONITA SPRINGS FL 34135

Title            DIRECTOR  
Name            NICHOLAS, MENDOZA  
Address        24208 PRODUCTION CIRCLE  
City-State-Zip: BONITA SPRINGS FL 34135

Title            DIRECTOR  
Name            MENDOZA, SAMUEL  
Address        24208 PRODUCTION CIRCLE  
City-State-Zip: BONITA SPRINGS FL 34135

*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:** NICHOLAS MENDOZA

PRES

01/11/2021

Electronic Signature of Signing Officer/Director Detail

Date