#### 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

### SIGNATURE: HALS BLANC

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# P07000018360

10570 US HIGHWAY 1 56 PORT SAINT LUCIE, FL 34952

# **Current Mailing Address:**

10570 US HIGHWAY 1 56 PORT SAINT LUCIE, FL 34952 US

## FEI Number: 20-8461192

# Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

BLANC, HALS 10570 US HIGHWAY 1 56 PORT SAINT LUCIE, FL 34952 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:

#### . .. ...

Officer/Director Detail :			
Title	STD	Title	V
Name	BLANC, HALS	Name	BLANC, HALS
Address	1170 NW LEONARDO CIR	Address	1170 NW LEONARDO CIR
City-State-Zip:	PORT SAINT LUCIE FL 34986	City-State-Zip:	PORT SAINT LUCIE FL 34986
Title	Р		
The	F		
Name	BLANC, HALS		
Address	1170 NW LEONARDO CIR		
City-State-Zip:	PORT SAINT LUCIE FL 34986		

above, or on an attachment with all other like empowered. PRESUDENT 04/30/2024

# FILED Apr 30, 2024 Secretary of State 5270649545CC

Certificate of Status Desired: No

Date

Date