

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000022022

**FILED**  
**Jan 29, 2018**  
**Secretary of State**  
**CC4984430391**

**Entity Name:** PROCTOR FIRE EXTINGUISHER INC

**Current Principal Place of Business:**

1499 SW 30TH AVE., #31  
BOYNTON BCH, FL 33426

**Current Mailing Address:**

1499 SW 30TH AVE., #31  
BOYNTON BCH, FL 33426

**FEI Number:** 20-8552762

**Certificate of Status Desired:** No

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

PROCTOR, ROBERT G  
103 AVOCADO RD.  
DELRAY BCH, FL 33444 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           PTD  
Name           PROCTOR, ROBERT G  
Address        103 AVOCADO RD.  
City-State-Zip: DELRAY BCH FL 33444

Title           SD  
Name           PROCTOR, JAN  
Address        103 AVOCADO RD.  
City-State-Zip: DELRAY BCH FL 33444

*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:** ROBERT PROCTOR

**PRES**

**01/29/2018**

Electronic Signature of Signing Officer/Director Detail

Date