

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000025507

Entity Name: A ALL PERFECT PROCESS INC.**Current Principal Place of Business:**1625 NW 1ST PL
CAPE CORAL, FL 33993**Current Mailing Address:**1625 NW 1ST PL
CAPE CORAL, FL 33993**FEI Number:** 45-4889917**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HAHNE, TIM
1625 NW 1ST PL
CAPE CORAL, FL 33993 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	DIR
Name	HAHNE, ROXANNE I
Address	1625 NW 1ST PL
City-State-Zip:	CAPE CORAL FL 33993

Title	VP S
Name	TREECE, RACHAEL I
Address	1625 NW 1ST PL
City-State-Zip:	CAPE CORAL FL 33993

Title	P
Name	HAHNE, TIM
Address	1625 NW 1ST PL
City-State-Zip:	CAPE CORAL FL 33993

Title	VP
Name	HORNSBY, CYLE
Address	1625 NW 1ST PL
City-State-Zip:	CAPE CORAL FL 33993

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: ROXANNE I HAHNE

DIR

03/07/2023

Electronic Signature of Signing Officer/Director Detail_____
Date