

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000083941

**FILED  
Apr 28, 2021  
Secretary of State  
4358341477CC**

**Entity Name:** HERCULES SOLUTIONS CORP

**Current Principal Place of Business:**

1500 WESTON ROAD  
SUITE 200  
WESTON, FL 33326

**Current Mailing Address:**

1500 WESTON ROAD  
SUITE 200  
WESTON, FL 33326 US

**FEI Number:** 81-4200806

**Certificate of Status Desired:** No

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

SANTIAGO, AUGUSTO F  
5340 NW 2ND AVE.  
PH-21  
BOCA RATON, FL 33487 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:** AUGUSTO F SANTIAGO

04/28/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            SANTIAGO, AUGUSTO F  
Address        5340 NW 2ND AVE.  
                  PH-21  
City-State-Zip: BOCA RATON FL 33487

Title            VICE PRESIDENT  
Name            SALAZAR, JORGE L  
Address        16500 GOLF CLUB RD.  
                  #105  
City-State-Zip: WESTON FL 33326

Title            TREASURER  
Name            SALAZAR, JORGE L  
Address        16500 GOLF CLUB ROAD  
                  #105  
City-State-Zip: WESTON FL 33326

Title            SECRETARY  
Name            SANTIAGO, AUGUSTO F  
Address        5340 NW 2ND AVE.  
                  PH-21  
City-State-Zip: BOCA RATON FL 33487

Title            DIRECTOR  
Name            SALAZAR, JORGE L  
Address        1500 GOLF CLUB ROAD  
                  #105  
City-State-Zip: WESTON FL 33326

Title            DIRECTOR  
Name            SANTIAGO, AUGUSTO F  
Address        5340 NW 2ND AVE.  
                  PH-21  
City-State-Zip: BOCA RATON FL 33487

*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:** AUGUSTO F SANTIAGO

**PRESIDENT**

04/28/2021

Electronic Signature of Signing Officer/Director Detail

Date