

**2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000092808

**Entity Name:** ELECTROSENE GAS COOKER, INC.**Current Principal Place of Business:**507 S. ANDERSON STREET  
BUNNELL, FL 32110**Current Mailing Address:**507 S. ANDERSON STREET  
BUNNELL, FL 32110 US**FEI Number: 81-4881015****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**AYODELE, SAMUEL OLUSEGUN PRESIDENT  
507 S. ANDERSON STREET  
BUNNELL, FL 32110 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: SAMUEL O. AYODELE****03/07/2025**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PRESIDENT  
Name AYODELE, SAMUEL O  
Address 507 S. ANDERSON STREET  
City-State-Zip: BUNNELL FL 32110

Title COO  
Name OYEGUNWA, OLAPADE R-  
Address 5504 RUTLEDGEVILLE LANE  
City-State-Zip: KNIGHTDALE NC 27545

Title D  
Name OYEGUNWA, GRACE O  
Address 5504 RUTLEDGEVILLE LANE  
City-State-Zip: KNIGHTDALE NC 27545

Title DIRECTOR, OF  
INFORMATION/TECHNOLOGY  
Name MCCALLUM, KERRINE GUINEVERE  
Address 17 REIDEL LANE  
City-State-Zip: PALM COAST FL 32164

Title DIRECTOR OF INTERNATIONAL  
MARKETING  
Name OLADIPUPO, MICHAEL KOLAWOLE  
Address GREENLAND AVENUE  
HUAQIAO TOWN ROOM 1805,  
BUILDING 11, LANE 259  
City-State-Zip: KUNSHAN CITY, SUZHOU OC

Title CHAIRMAN OF BOARD OF  
DIRECTORS  
Name AKINTOYE, ADEBANJI (PROF)  
Address #1 AKINTOYE CRESCENT  
City-State-Zip: ADO,EKITI EKITI STATE 00000

Title ASST. MARKETING DIRECTOR  
Name AYODELE, ISRAEL  
Address 1717 W 10TH ST.  
City-State-Zip: INDIANAPOLIS IN 46222

Title DIRECTOR OF PUBLIC RELATIONS  
Name ABEGUNDE, ADEOLA GRACE  
Address 10 RISE PARK BLVD  
City-State-Zip: LONDON ROMFORD RM1-4PP

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*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: SAMUEL O. AYODELE****PRESIDENT****03/07/2025**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	VP
Name	ARABOME-AYODELE, RITA KOREDE
Address	507 S. ANDERSON STREET
City-State-Zip:	BUNNELL FL 32110