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: IVANLENO PORTO

Electronic Signature of Signing Officer/Director Detail

PORT ST LUCIE, FL 34983

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Current Mailing Address:

166 SE CROSSPOINT DR

166 SE CROSSPOINT DR PORT ST LUCIE. FL 34983 US

Name and Address of Current Registered Agent:

PORTO, IVANLENO A 166 SE CROSSPOINT DR PORT ST LUCIE, FL 34983 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 **Officer/Director Detail :**

Title	P	Title	VP
Name	PORTO, IVANLENO A	Name	BESSA, EMIDIA P
Address	166 SE CROSSPOINT DR	Address	166 SE CROSSPOINT I
City-State-Zip:	PORT ST LUCIE FL 34983	City-State-Zip:	PORT ST LUCIE FL 34

FEI Number: 82-4447483

Entity Name: HOMEDEPOT PROFESSIONAL SERVICES CORP

Current Principal Place of Business:

DOCUMENT# P18000014947

Certificate of Status Desired: No

DR City-State-Zip: PORT ST LUCIE FL 34983

05/01/2019

Date

May 01, 2019 Secretary of State 4629145768CC

Date

FILED

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