

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P21000043900

Entity Name: OMNIMICROBE NATURAL SOLUTIONS, INC.**Current Principal Place of Business:**2550 NORTH FM 1229
COLORADO CITY, TX 79512**Current Mailing Address:**2550 NORTH FM 1229
COLORADO CITY, TX 79512 US**FEI Number: 87-2575319****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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	CEO, DIRECTOR
Name	POLLEY, ROBERT
Address	2550 NORTH FM 1229
City-State-Zip:	COLORADO CITY TX 79512

Title	CHAIRMAN, DIRECTOR
Name	BRADLEY, EARL O. III
Address	2550 NORTH FM 1229
City-State-Zip:	COLORADO CITY TX 79512

Title	CHIEF OF OPERATIONS, DIRECTOR
Name	TRUELOVE, MATT
Address	2550 NORTH FM 1229
City-State-Zip:	COLORADO CITY TX 79512

Title	CFO, DIRECTOR
Name	COOKSEY, JERRY
Address	2550 NORTH FM 1229
City-State-Zip:	COLORADO CITY TX 79512

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: JERRY COOKSEY**CFO****01/11/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date