

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000061140

**Entity Name:** PORTFOLIO MANAGEMENT / GIBBONE, INC.

**Current Principal Place of Business:**

10265 NW 129TH ST  
HIALEAH GARDENS, FL 33016

**Current Mailing Address:**

10265 NW 129TH ST  
HIALEAH GARDENS, FL 33016

**FEI Number:** 65-0601205

**Certificate of Status Desired:** No

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

HENRY, JANET  
10265 NW 129TH ST  
HIALEAH GARDENS, FL 33016 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 PT  
Name GIBBONE, STEVEN D  
Address 90 WATSON DRIVE  
City-State-Zip: MOUNT LAUREL NJ 08054

Title S  
Name SCICCHITANO, VERONICA  
Address 10265 NW 129TH STREET  
City-State-Zip: HIALEAH FL 33016

Title V  
Name SCHERZER, HAROLD  
Address 2102 LILAC COURT  
City-State-Zip: UPPER GWYNEDD PA 19446

Title V  
Name HENRY, JANET  
Address 10265 NW 129TH STREET  
City-State-Zip: HIALEAH FL 33016

*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:** STEVEN GIBBONE

**PRESIDENT**

**01/28/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date