

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F02000004942

**Entity Name:** ALLIANCE-ONE SERVICES, INC.

**Current Principal Place of Business:**

20408 BASHAN DRIVE, SUITE 231  
ATTN: CORPORATE SECRETARY TEAM  
ASHBURN, VA 20147

**Current Mailing Address:**

20408 BASHAN DRIVE, SUITE 231  
C/O ATTN: CORPORATE SECRETARY TEAM  
ASHBURN, VA 20147 US

**FEI Number:** 74-2764079

**Certificate of Status Desired:** No

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

CORPORATE CREATIONS NETWORK INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 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            PRESIDENT, COO, DIRECTOR  
Name            WHITLOCK, CONNIE  
Address        20408 BASHAN DRIVE, SUITE 231  
City-State-Zip: ASHBURN VA 20147

Title            TREASURER, DIRECTOR  
Name            STANOVICH, DAN  
Address        20408 BASHAN DRIVE, SUITE 231  
City-State-Zip: ASHBURN VA 20147

Title            SECRETARY, DIRECTOR  
Name            MOHLENHOFF, BRYCE  
Address        20408 BASHAN DRIVE, SUITE 231  
City-State-Zip: ASHBURN VA 20147

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:** BRYCE MOHLENHOFF

**SECRETARY**

**04/21/2023**

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

\_\_\_\_\_  
Date