

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000003418

Entity Name: BODEL, INC.**Current Principal Place of Business:**555 SOUTH FEDERAL HIGHWAY
SUITE 400
BOCA RATON, FL 33432**Current Mailing Address:**555 SOUTH FEDERAL HIGHWAY
SUITE 400
BOCA RATON, FL 33432**FEI Number:** 23-2626048**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SIG HOLDING, INC.
555 SOUTH FEDERAL HWY
STE 400
BOCA RATON, FL 33432 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 PD
Name YASS, JEFFREY
Address 401 CITY AVENUE, SUITE 220
City-State-Zip: BALA CYNWYD PA 19004

Title D
Name DOOLEY, MARK
Address 401 CITY AVENUE, SUITE 220
City-State-Zip: BALA CYNWYD PA 19004

Title VP, S
Name BRYCE, TED
Address 401 CITY AVENUE, SUITE 220
City-State-Zip: BALA CYNWYD PA 19004

Title D
Name DANTCHIK, ARTHUR
Address 401 CITY AVENUE, SUITE 220
City-State-Zip: BALA CYNWYD PA 19004

Title TREASURER
Name SACK, ROBERT
Address 401 CITY AVENUE, SUITE 220
City-State-Zip: BALA CYNWYD PA 19004

Title ASST. TREASURER
Name POCHE, PHILIP A
Address 401 E. CITY AVE
SUITE 220
City-State-Zip: BALA CYNWYD PA 19004

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: ROBERT SACK**TREASURER****04/27/2022**

Electronic Signature of Signing Officer/Director Detail

Date