

2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13000005095

Entity Name: PROVISTA, INC.**Current Principal Place of Business:**290 E. JOHN CARPENTER FREEWAY
IRVING, TX 75062**Current Mailing Address:**290 E. JOHN CARPENTER FREEWAY
IRVING, TX 75062 US**FEI Number: 46-3850418****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	PRESIDENT
Name	JOBE, BYRON
Address	290 E. JOHN CARPENTER FREEWAY
City-State-Zip:	IRVING TX 75062

Title	SECRETARY, DIRECTOR
Name	BERRY, DAVID
Address	290 E. JOHN CARPENTER FREEWAY
City-State-Zip:	IRVING TX 75062

Title	TREASURER, DIRECTOR
Name	ERTEL, DAVID
Address	290 E. JOHN CARPENTER FREEWAY
City-State-Zip:	IRVING FL

Title	ASSISTANT SECRETARY
Name	BEASLEY, KATHY
Address	290 E. JOHN CARPENTER FREEWAY
City-State-Zip:	IRVING TX 75062

Title	ASSISTANT TREASURER
Name	MOORE, TIM
Address	290 E. JOHN CARPENTER FREEWAY
City-State-Zip:	IRVING TX 75062

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: DAVID BERRY**SECRETARY****02/10/2025**_____
Electronic Signature of Signing Officer/Director Detail_____
Date