

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000004526

Entity Name: PRUDENTIAL OVERALL SUPPLY, INC.**Current Principal Place of Business:**1661 ALTON PARKWAY
IRVINE, CA 92606**Current Mailing Address:**1661 ALTON PARKWAY
IRVINE, CA 92606**FEI Number:** 95-1535681**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**INCRP SERVICES, INC.
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470 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	DIRECTOR, CHAIRMAN
Name	CLARK, DAN
Address	1661 ALTON PKWY
City-State-Zip:	IRVINE CA 92606

Title	DIRECTOR, PRESIDENT
Name	WELCH, CHRIS
Address	1661 ALTON PARKWAY
City-State-Zip:	IRVINE CA 92606

Title	DIRECTOR
Name	THOMPSON, JOHN
Address	1661 ALTON PARKWAY
City-State-Zip:	IRVINE CA 92606

Title	SECRETARY
Name	COMER, JANA
Address	1661 ALTON PARKWAY
City-State-Zip:	IRVINE CA 92606

Title	CEO
Name	CLARK, JOHN
Address	1661 ALTON PARKWAY
City-State-Zip:	IRVINE CA 92606

Title	DIRECTOR
Name	WATTS, TOM
Address	1661 ALTON PARKWAY
City-State-Zip:	IRVINE CA 92606

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: JANA COMER**SECRETARY****04/13/2022**_____
Electronic Signature of Signing Officer/Director Detail_____
Date