

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F19000000717

**Entity Name:** TWENTY SECOND COMPANY INC.

**Current Principal Place of Business:**

900 E. PRIMA VISTA BLVD., SUITE 300  
PORT ST LUCIE, FL 34952

**Current Mailing Address:**

900 E. PRIMA VISTA BLVD., SUITE 300  
PORT ST LUCIE, FL 34952 US

**FEI Number:** 90-0598343

**Certificate of Status Desired:** No

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

NRAI SERVICES, INC.  
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 SECRETARY, DIRECTOR  
Name SMITH, ADAM ROBERT  
Address 2975 WENTWORTH WAY  
City-State-Zip: TARPON SPRINGS FL 34688

Title PRESIDENT  
Name BANG, GARY RONALD  
Address 106 SE MIRA LAVELLA  
City-State-Zip: PORT SAINT LUCIE FL 34984

Title CFO  
Name WON, DAVID Y  
Address 11948 SW CRESTWOOD CIRCLE  
City-State-Zip: PORT SAINT LUCIE FL 349872738

Title DIRECTOR  
Name STRAUP, KENNETH A  
Address 110 E SHERMAN ST  
City-State-Zip: PALATINE IL 60067

*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:** GARY RONALD BANG

**PRESIDENT**

**02/24/2023**

Electronic Signature of Signing Officer/Director Detail

Date