

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F21000006571

Entity Name: FOUNDER PROJECT RX, INC.**Current Principal Place of Business:**5109 OAK LANE
ARLINGTON, TX 76017**Current Mailing Address:**5109 OAK LANE
ARLINGTON, TX 76017 US**FEI Number:** 87-2231366**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**INCorp SERVICES, INC.
17888 67TH CT N
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	P
Name	OTTS, NICKY L
Address	5109 OAK LANE
City-State-Zip:	ARLINGTON TX 76017

Title	VP
Name	OTTS, VICKIE
Address	5109 OAK LANE
City-State-Zip:	ARLINGTON TX 76017

Title	SEC
Name	OTTS, NICKY L
Address	5109 OAK LANE
City-State-Zip:	ARLINGTON TX 76017

Title	T
Name	OTTS, VICKIE
Address	5109 OAK LANE
City-State-Zip:	ARLINGTON TX 76017

Title	DIR
Name	OTTS, NICKY L
Address	5109 OAK LANE
City-State-Zip:	ARLINGTON TX 76017

Title	DIR
Name	OTTS, VICKIE
Address	5109 OAK LANE
City-State-Zip:	ARLINGTON TX 76017

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: NICKY OTTS**PRESIDENT****03/27/2022**_____
Electronic Signature of Signing Officer/Director Detail_____
Date