

2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F23000006424

Entity Name: SOURCEPOINT TECHNOLOGIES, INC.

Current Principal Place of Business:

228 PARK AVE S
#87903
NEW YORK, NY 10003-1502

Current Mailing Address:

228 PARK AVE S
#87903
NEW YORK, NY 10003-1502 US

FEI Number: 46-5268798

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 COO
Name KANE, BRIAN
Address 228 PARK AVE S
#87903
City-State-Zip: NEW YORK NY 10003-1502

Title SECRETARY
Name KANE, BRIAN
Address 228 PARK AVE S
#87903
City-State-Zip: NEW YORK NY 10003-1502

Title DIRECTOR
Name BAROKAS, BEN
Address 228 PARK AVE S
#87903
City-State-Zip: NEW YORK NY 10003-1502

Title DIRECTOR
Name KANE, BRIAN
Address 228 PARK AVE S
#87903
City-State-Zip: NEW YORK NY 10003-1502

Title DIRECTOR
Name O'DONNELL, CLEM
Address 228 PARK AVE S
#87903
City-State-Zip: NEW YORK NY 10003-1502

Title DIRECTOR
Name OH, THOMAS
Address 228 PARK AVE S
#87903
City-State-Zip: NEW YORK NY 10003-1502

Title PRESIDENT/CEO
Name BAROKAS, BEN
Address 228 PARK AVE S
#87903
City-State-Zip: NEW YORK NY 10003-1502

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: BRIAN KANE

COO

03/21/2025

Electronic Signature of Signing Officer/Director Detail

Date