

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000006139

Entity Name: SOLUTIONS4SURE.COM, INC.**Current Principal Place of Business:**6600 NORTH MILITARY TRAIL
BOCA RATON, FL 33496**Current Mailing Address:**6600 NORTH MILITARY TRAIL
BOCA RATON, FL 33496 US**FEI Number:** 06-1526627**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 S PINE ISLAND RD
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 DIRECTOR
Name BLEISCH, N. DAVID
Address 6600 NORTH MILITARY TRAIL
City-State-Zip: BOCA RATON FL 33496

Title VP
Name EDLER, CHRISTOPHER M.
Address 6600 NORTH MILITARY TRAIL
City-State-Zip: BOCA RATON FL 33496

Title TREASURER
Name LELAND, RICHARD
Address 6600 NORTH MILITARY TRAIL
City-State-Zip: BOCA RATON FL 33496

Title VP
Name HAAS, RICHARD A. JR
Address 6600 NORTH MILITARY TRAIL
City-State-Zip: BOCA RATON FL 33496

Title VP
Name HARVEY, MICHAEL
Address 6600 NORTH MILITARY TRAIL
City-State-Zip: BOCA RATON FL 33496

Title PRESIDENT
Name MOHAN, STEPHEN M
Address 6600 NORTH MILITARY TRAIL
City-State-Zip: BOCA RATON FL 33496

Title VP
Name LELAND, RICHARD
Address 6600 NORTH MILITARY TRAIL
City-State-Zip: BOCA RATON FL 33496

Title VP
Name BLEISCH, N. DAVID
Address 6600 NORTH MILITARY TRAIL
City-State-Zip: BOCA RATON FL 33496

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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: N. DAVID BLEISCH**DIRECTOR****04/20/2021**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title SECRETARY
Name BLEISCH, N. DAVID
Address 6600 NORTH MILITARY TRAIL
City-State-Zip: BOCA RATON FL 33496

Title ASSISTANT SECRETARY
Name LINDSEY, KATRINA S.
Address 6600 NORTH MILITARY TRAIL
City-State-Zip: BOCA RATON FL 33496

Title ASSISTANT SECRETARY
Name SAMPO, KRISTEN L.
Address 6600 NORTH MILITARY TRAIL
City-State-Zip: BOCA RATON FL 33496

Title ASSISTANT SECRETARY
Name WHITE, JOSEPH G.
Address 6600 NORTH MILITARY TRAIL
City-State-Zip: BOCA RATON FL 33496