

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F00000000219

**Entity Name:** SCRIBE MANUFACTURING, INC.**Current Principal Place of Business:**14421 MYERLAKE CIRCLE  
CLEARWATER, FL 33760**Current Mailing Address:**14421 MYERLAKE CIRCLE  
CLEARWATER, FL 33760 US**FEI Number:** 06-1558423**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM  
C/O 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           TREASURER  
Name           MILLER, DAVID  
Address       14421 MYERLAKE CIRCLE  
City-State-Zip: CLEARWATER FL 33760

Title           PRESIDENT  
Name           BRUNO, EMMANUEL  
Address       14421 MYERLAKE CIRCLE  
City-State-Zip: CLEARWATER FL 33760

Title           DIRECTOR  
Name           BRUNO, EMMANUEL  
Address       14421 MYERLAKE CIRCLE  
City-State-Zip: CLEARWATER FL 33760

Title           DIRECTOR  
Name           MILLER, DAVID  
Address       14421 MYERLAKE CIRCLE  
City-State-Zip: CLEARWATER FL 33760

Title           DIRECTOR  
Name           KOICHOPOLOS, MICHAEL  
Address       14421 MYERLAKE CIRCLE  
City-State-Zip: CLEARWATER FL 33760

Title           DIRECTOR  
Name           HORVILLEUR, CAMILO  
Address       14421 MYERLAKE CIRCLE  
City-State-Zip: CLEARWATER FL 33760

Title           DIRECTOR  
Name           FOX, JONATHAN  
Address       14421 MYERLAKE CIRCLE  
City-State-Zip: CLEARWATER FL 33760

Title           SECRETARY  
Name           KOICHOPOLOS, MICHAEL  
Address       14421 MYERLAKE CIRCLE  
City-State-Zip: CLEARWATER FL 33760

*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:** EMMANUEL BRUNO

PRESIDENT

04/04/2018

Electronic Signature of Signing Officer/Director Detail

Date