## 2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# F22000005568

Entity Name: WINSUPPLY MIAMI FL CO.

## **Current Principal Place of Business:**

3110 KETTERING BLVD C/O WGS - COMPLIANCE SERVICES MORAINE, OH 45439

# **Current Mailing Address:**

3110 KETTERING BLVD C/O WGS - COMPLIANCE SERVICES MORAINE, OH 45439-1924 US

## FEI Number: 88-3957864

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 US FILED Mar 26, 2024 Secretary of State 8303283639CC

Certificate of Status Desired: No

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

## **Officer/Director Detail :**

Title	DIRECTOR, PRESIDENT	Title	DIRECTOR
Name	CORRAL, GUSTAVO A	Name	LYON, STEVEN E
Address	8830 NW 24TH TER	Address	3110 KETTERING BLVD
City-State-Zip:	DORAL FL 33172	City-State-Zip:	MORAINE OH 45439-1924
Title	SECRETARY	Title	TREASURER
Name	KIRKLAND, MICHAEL S	Name	CULLER, SEAN W
Address	3110 KETTERING BLVD	Address	3110 KETTERING BLVD
City-State-Zip:	MORAINE OH 45439-1924	City-State-Zip:	MORAINE OH 45439-1924
Title	DIRECTOR	Title	DIRECTOR
Title Name	DIRECTOR AIELLO, CURTIS F.	Title Name	DIRECTOR OGLES, JUSTIN D.
Name	AIELLO, CURTIS F.	Name	OGLES, JUSTIN D.
Name Address	AIELLO, CURTIS F. 5300 NW 165TH ST,	Name Address	OGLES, JUSTIN D. 505 MAPLELEAF DR,
Name Address City-State-Zip:	AIELLO, CURTIS F. 5300 NW 165TH ST, MIAMI LAKES FL 33014-6233	Name Address City-State-Zip:	OGLES, JUSTIN D. 505 MAPLELEAF DR, NASHVILLE TN 37210-3719
Name Address City-State-Zip: Title	AIELLO, CURTIS F. 5300 NW 165TH ST, MIAMI LAKES FL 33014-6233 DIRECTOR	Name Address City-State-Zip: Title	OGLES, JUSTIN D. 505 MAPLELEAF DR, NASHVILLE TN 37210-3719 DIRECTOR
Name Address City-State-Zip: Title Name	AIELLO, CURTIS F. 5300 NW 165TH ST, MIAMI LAKES FL 33014-6233 DIRECTOR ATWELL, MICHAEL D. 3110 KETTERING BLVD	Name Address City-State-Zip: Title Name	OGLES, JUSTIN D. 505 MAPLELEAF DR, NASHVILLE TN 37210-3719 DIRECTOR FERGUSON, ROBERT W. 3110 KETTERING BLVD

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: SEAN W. CULLER

TREASURER

03/26/2024

Date

Electronic Signature of Signing Officer/Director Detail