

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F22000007141

Entity Name: RANGEFORCE INC.**Current Principal Place of Business:**440 MONTICELLO AVE
SUITE 1802 PMB 44296
NORFOLK, VA 23510-2670**Current Mailing Address:**440 MONTICELLO AVE
SUITE 1802 PMB 44296
NORFOLK, VA 23510-2670 US**FEI Number: NOT APPLICABLE****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 CHIEF PRODUCT OFFICER
Name MUST, TAAVI
Address 440 MONTICELLO AVE
SUITE 1802 PMB 44296
City-State-Zip: NORFOLK VA 23510-2670

Title SECRETARY
Name MUST, TAAVI
Address 440 MONTICELLO AVE
SUITE 1802 PMB 44296
City-State-Zip: NORFOLK VA 23510-2670

Title CHAIRMAN OF THE BOARD
Name MUST, TAAVI
Address 440 MONTICELLO AVE
SUITE 1802 PMB 44296
City-State-Zip: NORFOLK VA 23510-2670

Title DIRECTOR
Name MUST, TAAVI
Address 440 MONTICELLO AVE
SUITE 1802 PMB 44296
City-State-Zip: NORFOLK VA 23510-2670

Title DIRECTOR
Name WITHAM, GIBB
Address 440 MONTICELLO AVE
SUITE 1802 PMB 44296
City-State-Zip: NORFOLK VA 23510-2670

Title DIRECTOR
Name MOOSA, NAZO
Address 440 MONTICELLO AVE
SUITE 1802 PMB 44296
City-State-Zip: NORFOLK VA 23510-2670

Title DIRECTOR
Name FRIEDRICHS, OLIVER
Address 440 MONTICELLO AVE
SUITE 1802 PMB 44296
City-State-Zip: NORFOLK VA 23510-2670

Title CEO
Name JACKSON, BRETT
Address 440 MONTICELLO AVE
SUITE 1802 PMB 44296
City-State-Zip: NORFOLK VA 23510-2670

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: TAAVI MUST**CHIEF PRODUCT
OFFICER****04/10/2024**

Electronic Signature of Signing Officer/Director Detail

Date