## 2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000052547

Entity Name: PSORIA-SHIELD INC.

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

6408 W. LINEBAUGH AVE SUITE 103 TAMPA, FL 33625

## **Current Mailing Address:**

2500 W HIGGINS RD SUITE 103 HOFFMAN ESTATES, IL 60169 US

# FEI Number: 27-0381506

### Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

The above named entity submits this statement for the nurpose of changing its registered office or registered agent, or both, in the State of Florida

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SIGNATURE:	MARK WILLIAMS			04/16/2018
	Electronic Signature of Registered Agent			Date
Officer/Direct	or Detail :			
Title [	DIRECTOR	Title	DIRECTOR	
Name ł	KANDALEPAS, ANDREW	Name	PAPADOPOULOS, PERIKLIS	
Address 2	2500 W HIGGINS RD SUITE 780	Address	2500 W HIGGINS RD SUITE 780	0
City-State-Zip: H	HOFFMAN ESTATES IL 60169	City-State-Zip:	HOFFMAN ESTATES IL 60169	
Title	VICE-PRESIDENT	Title	TREASURER	
Name ł	KANDALEPAS, ANDREW	Name	KANDALEPAS, ANDREW	
Address 2	2500 W HIGGINS ROAD SUITE 780	Address	2500 W HIGGINS RD SUITE 780	0
City-State-Zip: H	HOFFMAN ESTATES FL 33625	City-State-Zip:	HOFFMAN ESTATES IL 60169	

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: ANDREW KANDALEPAS

PRESIDENT

04/16/2018

Electronic Signature of Signing Officer/Director Detail

FILED Apr 16, 2018 Secretary of State CC8022741791

Certificate of Status Desired: No