		ing Address.			
	414 DEKALE NORRISTOV	3 ST VN, PA 19401 US			
FEI Number: 80-0461329				Certificate of Status Desired: No	
	Name and A	ddress of Current Registered Agent:			
	LICENSES, ETC 886 110TH AVE SUITE 6 NAPLES, FL 34	Ν			
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.					
	The above named	entity submits this statement for the purpose of changing its regist	tered office or regis	tered agent, or both, in the State of Fl	orida.
		l entity submits this statement for the purpose of changing its regist : TODD BABBIT	tered office or regis	tered agent, or both, in the State of Fl	orida. 09/21/2021
			tered office or regis	tered agent, or both, in the State of Fl	
		: TODD BABBIT Electronic Signature of Registered Agent	tered office or regis	tered agent, or both, in the State of Fl	09/21/2021
	SIGNATURE	: TODD BABBIT Electronic Signature of Registered Agent	tered office or regis	tered agent, or both, in the State of Fl	09/21/2021
	SIGNATURE	TODD BABBIT Electronic Signature of Registered Agent Ctor Detail :			09/21/2021
	SIGNATURE Officer/Direc Title	TODD BABBIT Electronic Signature of Registered Agent Ctor Detail : P	Title	S/T	09/21/2021
	SIGNATURE Officer/Direc Title Name	TODD BABBIT Electronic Signature of Registered Agent Ctor Detail : P TAHTABROUNIAN, JOHN 400 HIGHVIEW DR	Title Name	S/T TAHTABROUNIAN, JOHN 400 HIGHVIEW DR	09/21/2021
	SIGNATURE Officer/Direc Title Name Address	TODD BABBIT Electronic Signature of Registered Agent Ctor Detail : P TAHTABROUNIAN, JOHN 400 HIGHVIEW DR	Title Name Address	S/T TAHTABROUNIAN, JOHN 400 HIGHVIEW DR	09/21/2021

Entity Name: XAVIER BUILDERS, INC.

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

DOCUMENT# P09000068035

414 DEKALB ST NORRISTOWN, PA 19401

Current Mailing Address:

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.

PRESIDENT

09/21/2021

Electronic Signature of Signing Officer/Director Detail

Date

FILED Sep 21, 2021 Secretary of State 7054458705CC