# 2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000010801

Entity Name: H5 FLORIDA ENTERPRISES, INC.

### Current Principal Place of Business:

8163 ADAM BAKER WAY METCALFE, ON K0A2P-0

## **Current Mailing Address:**

8163 ADAM BAKER WAY METCALFE, ON K0A2P-0 CA

# FEI Number: 37-1781519

### Name and Address of Current Registered Agent:

INCORP SERICES, INC. 17888 67TH COURT NORTH LOXAHATCHEE, FL 33470 US FILED Apr 13, 2018 Secretary of State CC1234385109

Date

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	PRES	Title	VP
Name	DE BEER, SUSANNA	Name	DE BEER, SUSANNA
Address	8163 ADAM BAKER WAY	Address	8163 ADAM BAKER WAY
City-State-Zip	METCALFE ON K0A2P-0	City-State-Zip:	METCALFE ONTARIO K0A2P-0
Title	VP	Title	SEC
Name	DE BEER, MARIANNE	Name	CARDOSO, ARIEL
Address	8152 ADAM BAKER WAY	Address	111 SOUTHPORT DR.
City-State-Zip	METCALFE ON K0A2P-0	City-State-Zip:	OTTAWA ON K1T3P-5
Title	DIR	Title	DIR
Name	DE BEER, SUSANNA	Name	DE BEER, MARIANNE
Address	8163 ADAM BAKER WAY	Address	8152 ADAM BAKER WAY
City-State-Zip	METCALFE ON K0A2P-0	City-State-Zip:	METCALFE ON K0A2P-0

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: SUSANNA DE BEER

OWNER

04/13/2018

Electronic Signature of Signing Officer/Director Detail

Date