

N001689543
Date Filed: 8/31/2023
John R. Ashcroft
Missouri Secretary of State

*** SECTION 1, 3 & 4 ARE REQUIRED**

REPORT DUE BY: 8/31/2023

N001689543
Concrete Truth Praise Inc
DEVON PRICE
9204 E. 85TH P.O. BOX 9804
64134
KANSAS CITY MO 64138

	ORGANIZED UNDER THE LAWS OF: <u>Missouri</u>
1	PRINCIPAL PLACE OF BUSINESS OR CORPORATE HEADQUARTERS: * 11505 Hickman Mills Dr (Required) <hr/> STREET Kansas City MO 64134-4210 CITY / STATE ZIP

2 If changing the registered agent and/or registered office address, please check the appropriate box(es) and fill in the necessary information.

The new registered agent _____

IF CHANGING THE REGISTERED AGENT, AN ORIGINAL WRITTEN CONSENT FROM THE NEW REGISTERED AGENT MUST BE ATTACHED AND FILED WITH THIS REGISTRATION REPORT.

The new registered office address _____

Must be a Missouri address, PO Box alone is not acceptable. This section is not applicable for Banks, Trusts and Foreign Insurance.

	OFFICERS NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). MUST LIST PRESIDENT AND SECRETARY BELOW	A	BOARD OF DIRECTORS NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). MUST LIST AT LEAST THREE DIRECTORS BELOW	B
3	<u>PRESIDENT</u> Price, Vortec' STREET 11505 Hickman Mills Dr CITY/STATE/ZIP <u>Kansas City MO 64134-4210</u>		<u>NAME</u> Price, Vortec' STREET 11505 Hickman Mills Dr CITY/STATE/ZIP <u>Kansas City MO 64134-4210 USA</u>	
	<u>SECRETARY</u> Franklin, Faith STREET 11505 Hickman Mills Dr CITY/STATE/ZIP <u>Kansas City MO 64134-4210</u>		<u>NAME</u> Price, Vortec' STREET 11505 Hickman Mills Dr CITY/STATE/ZIP <u>Kansas City MO 64134-4210 USA</u>	
	STREET _____ CITY/STATE/ZIP _____		<u>NAME</u> Franklin, Faith STREET 11505 Hickman Mills Dr CITY/STATE/ZIP <u>Kansas City MO 64134-4210 USA</u>	
	STREET _____ CITY/STATE/ZIP _____		<u>NAME</u> _____ STREET _____ CITY/STATE/ZIP _____	

NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS ARE ATTACHED

4 The undersigned understands that false statements made in this report are punishable for the crime of making a false declaration under Section 575.060 RSMo. Photocopy or stamped signature not acceptable. *

Authorized party or officer sign here Vortec' Price (Required)

Please print name and title of signer: Vortec' Price / President

NAME TITLE

REGISTRATION REPORT FEE IS:
 ___\$10.00 If filed on or before 8/31/2023
 ___\$15.00 If filed after 9/30/2023

Corporation will be administratively dissolved if report is not filed by 11/29/2024

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE

E-MAIL ADDRESS (OPTIONAL): _____