

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000010453

**Entity Name:** SALT FIX, INC.

**Current Principal Place of Business:**

689 NE 6TH CT.

#202

BOYNTON BEACH, FL 33435

**Current Mailing Address:**

689 NE 6TH CT.

#202

BOYNTON BEACH, FL 33435

**FEI Number:** 46-1610680

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MISTER NONPROFIT CONSULTANCY, INC.

924 NE 16TH ST

FORT LAUDERDALE, FL 33304 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 P  
Name KAUFMANN, ALLISON  
Address 689 NE 6TH CT., #202  
City-State-Zip: BOYNTON BEACH FL 33435

Title VP  
Name GAYLORD, JASON  
Address 689 NE 6TH CT.  
#202  
City-State-Zip: BOYNTON BEACH FL 33435

Title SECRETARY  
Name BROOKS, MARY  
Address 689 NE 6TH CT.  
#202  
City-State-Zip: BOYNTON BEACH FL 33435

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ALLISON KAUFMANN

**PRESIDENT**

**03/21/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date