

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 551347

Entity Name: B & R PRODUCTS, INC.**Current Principal Place of Business:**18721 S.W. 104 AVE.
MIAMI, FL 33157-6832**Current Mailing Address:**18721 S.W. 104 AVE.
MIAMI, FL 33157-6832**FEI Number:** 59-1790499**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CF REGISTERED AGENT, INC.
100 S. ASHLEY DRIVE
SUITE 400
TAMPA, FL 33602 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:** BY: JOSE A. LOREDO, ESQ.

03/15/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP, D
Name MILLARD, W. ROBERT III
Address 18721 S.W. 104 AVE.
City-State-Zip: MIAMI FL 33157-6832

Title VP
Name ROSS, JAMES
Address 18721 S.W. 104 AVE.
City-State-Zip: MIAMI FL 33157-6832

Title VP
Name GRAU, ABDEL
Address 18721 S.W. 104 AVE.
City-State-Zip: MIAMI FL 33157-6832

Title VP
Name HENNING, GENE
Address 18721 S.W. 104 AVE.
City-State-Zip: MIAMI FL 33157-6832

Title P, S, D
Name URDANETA, RAYNER
Address 18721 S.W. 104 AVE.
City-State-Zip: MIAMI FL 33157-6832

Title VP, D
Name URDANETA, LUIS
Address 18721 S.W. 104 AVE.
City-State-Zip: MIAMI FL 33157-6832

Title VP
Name CASTELLON, MARIA
Address 18721 S.W. 104 AVE.
City-State-Zip: MIAMI FL 33157-6832

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: OSWALDO ECHENIQUE

SP DIRECTOR

03/15/2017

Electronic Signature of Signing Officer/Director Detail

Date