

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000072414

**FILED**  
**Apr 30, 2016**  
**Secretary of State**  
**CC9788118033**

**Entity Name:** XURGE 3D, CORPORATION

**Current Principal Place of Business:**

420 SW 136 AVE  
MIAMI, FL 33184

**Current Mailing Address:**

420 SW 136 AVE  
MIAMI, FL 33184

**FEI Number:** 01-0727409

**Certificate of Status Desired:** No

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

MARTINEZ, GRICEL R  
420 SW 136 AVE  
MIAMI, FL 33184 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	Title	VP
Name	MARTINEZ, SERGIO F	Name	MARTINEZ, GRICEL R
Address	420 SW 136 AVE	Address	420 SW 136 AVE
City-State-Zip:	MIAMI FL 33184	City-State-Zip:	MIAMI FL 33184

*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:** GRICEL R MARTINEZ

VP

04/30/2016

Electronic Signature of Signing Officer/Director Detail

Date