4801 JOHNSOI	ncipal Place of Business: N RD., STE 7 EEK, FL 33073-4359		CC8953775	9408
Current Mai	ling Address:			
	SON RD., STE 7 CREEK, FL 33073-4359			
FEI Number: 55-0828828		Certificate of Status Desired: No		
Name and A	ddress of Current Registered Agent:			
BARRERA, CA 4801 JOHNSOI STE 7 COCONUT CR				
The above name	d entity submits this statement for the purpose of changing its reg	gistered office or regis	tered agent, or both, in the State of Florida.	
			0, ,	
SIGNATURE	CARLOS BARRERA			/15/2017
SIGNATURE	E: CARLOS BARRERA Electronic Signature of Registered Agent			/15/2017 Date
SIGNATURE Officer/Dire	Electronic Signature of Registered Agent			
	Electronic Signature of Registered Agent	Title		
Officer/Dire	Electronic Signature of Registered Agent	Title Name	03	
Officer/Dire	Electronic Signature of Registered Agent ctor Detail : PRESIDENT, TREASURER		03. SECRETARY	
<b>Officer/Dire</b> Title Name	Electronic Signature of Registered Agent ctor Detail : PRESIDENT, TREASURER BARRERA, CARLOS	Name	03, SECRETARY GRAISEN, ANDY	
<b>Officer/Dire</b> Title Name Address	Electronic Signature of Registered Agent ctor Detail : PRESIDENT, TREASURER BARRERA, CARLOS 4801 JOHNSON RD., STE 7	Name Address	03. SECRETARY GRAISEN, ANDY 4801 JOHNSON RD., STE 7	
<b>Officer/Dire</b> Title Name Address City-State-Zip:	Electronic Signature of Registered Agent ctor Detail : PRESIDENT, TREASURER BARRERA, CARLOS 4801 JOHNSON RD., STE 7 COCONUT CREEK FL 33073-4359	Name Address	03. SECRETARY GRAISEN, ANDY 4801 JOHNSON RD., STE 7	
Officer/Dire Title Name Address City-State-Zip: Title	Electronic Signature of Registered Agent <b>ctor Detail :</b> PRESIDENT, TREASURER BARRERA, CARLOS 4801 JOHNSON RD., STE 7 COCONUT CREEK FL 33073-4359 VP	Name Address	03. SECRETARY GRAISEN, ANDY 4801 JOHNSON RD., STE 7	

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: CARLOS BARRERA

Electronic Signature of Signing Officer/Director Detail

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000025602

Entity Name: KERAMER CORPORATION

03/15/2017 Date

## FILED Mar 15, 2017 Secretary of State CC8953775468