

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000007443

**Entity Name:** COVE CEILINGS, INC.

**Current Principal Place of Business:**

943 NE 25TH AVE  
POMPANO BEACH, FL 33062

**Current Mailing Address:**

943 NE 25TH AVE  
POMPANO BEACH, FL 33062 UN

**FEI Number:** 20-0577971

**Certificate of Status Desired:** No

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

GERSHON, ROBERT S  
943 NE 25 AVE  
POMPANO BEACH, FL 33062 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 PD  
Name GERSHON, ROBERT  
Address 943 NE 25TH AVE  
City-State-Zip: POMPANO BEACH FL 33062

Title VSTD  
Name ZIESAK, MIKE  
Address 943 NE 25TH AVE  
City-State-Zip: POMPANO BEACH FL 33062

*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:** ROBERT GERSHON

**PRESIDENT**

**02/09/2017**

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

\_\_\_\_\_  
Date