nent with all other like empowered.

Electronic Signature of Signing Officer/Director Detail

FILE	FILED	
Apr 12, 2	20	
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Secretary of State CC7349146245

2013

Certificate of Status Desired: No

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:

Officer/Director Detail :

Unicendirector Detail.				
Title	Р	Title	VP	
Name	MUSSMAN, LOUIS I	Name	KU, BRIAN T	
Address	12550 BISCAYNE BLVD., SUITE 406	Address	12550 BISCAYNE BLVD., SUITE 406	
City-State-Zip:	MIAMI FL 33181	City-State-Zip:	MIAMI FL 33181	

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.

PRESIDENT

SIGNATURE: LOUIS MUSSMAN

04/12/2013

Date

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000104182

Entity Name: KU & MUSSMAN, P.A.

Current Principal Place of Business:

12550 BISCAYNE BOULEVARD 406 MIAMI, FL 33181

Current Mailing Address:

12550 BISCAYNE BOULEVARD 406 MIAMI, FL 33181

FEI Number: 20-1265164

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

MUSSMAN, LOUIS I 12550 BISCAYNE BOULEVARD 406 MIAMI, FL 33181 US

Date