

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000075918

**Entity Name:** KASGIS ENTERPRISE INC.

**Current Principal Place of Business:**

22184 SW 93RD CT  
MIAMI, FL 33190

**Current Mailing Address:**

22184 SW 93RD CT  
MIAMI, FL 33190 US

**FEI Number: 80-0643428**

**Certificate of Status Desired: No**

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

SOLORZANO, NORMA J  
22184 SW 93RD CT  
MIAMI, FL 33190 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            PRESIDENT  
Name            SOLORZANO, LUIS I  
Address        22184 SW 93RD CT  
City-State-Zip: MIAMI FL 33190

Title            VP  
Name            SOLORZANO, ROSA K  
Address        22184 SW 93RD CT  
City-State-Zip: MIAMI FL 33190

Title            SCIENTIFIC ADVISOR  
Name            VERA, EUDES  
Address        32 CHURCH GATE  
                  FLAT 7, LE1 4AJ  
City-State-Zip: LEICESTER

Title            MARKETING ADVISOR  
Name            SOLORZANO, LUIS E  
Address        22184 SW 93RD CT  
City-State-Zip: MIAMI FL 33190

Title            BUSINESS ADVISOR  
Name            JIMENEZ, YANMIVER  
Address        22184 SW 93RD CT  
City-State-Zip: MIAMI FL 33190

Title            DIRECTOR  
Name            SENDAS, GIBRAIL  
Address        22184 SW 93RD CT  
City-State-Zip: CUTLER BAY FL 33190

*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: ROSA SOLORZANO**

**VP**

**04/01/2019**

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

\_\_\_\_\_  
Date