

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000054113

**Entity Name:** FILMORIN FLORIDA, INC.

**Current Principal Place of Business:**

677 NORTH WASHINGTON BLVD.  
SUITE# 57  
SARASOTA, FL 34236

**Current Mailing Address:**

P.O. BOX 50774  
SARASOTA, FL 34232 US

**FEI Number:** 39-2080637

**Certificate of Status Desired:** Yes

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

USA LICENSE BROKERAGE AND AGENCY INT., LLC  
6132 41ST STREET EAST  
BRADENTON, FL 34203 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 PSD  
Name KANTOR, EDIT  
Address 677 NORTH WASHINGTON BLVD.,  
SUIT# 57  
City-State-Zip: SARASOTA FL 34236

Title VPD  
Name TEMESI, LASZLO  
Address 677 NORTH WASHINGTON BLVD.,  
SUIT# 57  
City-State-Zip: SARASOTA FL 34236

Title TD  
Name SZILADI, GYULA  
Address 677 NORTH WASHINGTON BLVD.,  
SUITE# 57  
City-State-Zip: SARASOTA FL 34236

*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:** KANTOR EDIT

PSD

02/27/2015

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

\_\_\_\_\_  
Date