

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000078376

**Entity Name:** IMMOFIVE CORP

**Current Principal Place of Business:**

24890 EBRO CT  
BONITA SPRINGS, FL 34135

**Current Mailing Address:**

24890 EBRO CT  
BONITA SPRINGS, FL 34135 US

**FEI Number:** 46-3793047

**Certificate of Status Desired:** No

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

KOBE, THOMAS  
24890 EBRO CT  
BONITA SPRINGS, FL 34135 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 P  
Name SCHERRER, KURT  
Address 24890 EBRO CT  
City-State-Zip: BONITA SPRINGS FL 34135

Title D  
Name KOBE, THOMAS  
Address 24890 EBRO CT  
City-State-Zip: BONITA SPRINGS FL 34135

*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:** THOMAS KOBE

D

04/30/2016

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

\_\_\_\_\_  
Date