

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000050087

**Entity Name:** DADE BULB, INC.

**Current Principal Place of Business:**

12451 S DIXIE HWY  
MIAMI, FL 33156

**FILED**  
**Feb 12, 2015**  
**Secretary of State**  
**CC6571588228**

**Current Mailing Address:**

1287 E NEWPORT CENTER DRIVE  
SUITE 207  
DEERFIELD BEACH, FL 33442 US

**FEI Number:** 65-0424327

**Certificate of Status Desired:** No

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

GEROWSKY, JAKE  
1287 E NEWPORT CENTER DRIVE  
SUITE 207  
DEERFIELD BEACH, FL 33442 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            VP  
Name            GERSOWSKY, JAKE  
Address        1287 E NEWPORT CENTER DRIVE  
                 SUITE 207  
City-State-Zip: DEERFIELD BEACH FL 33442

Title            P  
Name            HENNINGS, ASHLEY  
Address        12451 S DIXIE HWY  
City-State-Zip: MIAMI FL 33156

Title            VP  
Name            CIVIN, STANLEY  
Address        10382 BUENA VENTURA DR  
City-State-Zip: BOCA RATON FL 33498

*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:** ASHLEY HENNINGS

P

02/12/2015

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

\_\_\_\_\_ Date