

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000091176

**Entity Name:** KAPPA TAU, INC.

**Current Principal Place of Business:**

115 SE 2ND ST  
2ND FLOOR  
MIAMI, FL 33131

**Current Mailing Address:**

115 SE 2ND ST  
2ND FLOOR  
MIAMI, FL 33131

**FEI Number:** 65-0644361

**Certificate of Status Desired:** No

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

DEMOS, ANGELO P ESQ.  
12601 SW 10TH AVENUE  
PINECREST, FL 33156 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 PDAS  
Name CONSTANTINO, TOEDORO  
Address 115 SE 2ND STREET 2ND FLOOR  
City-State-Zip: MIAMI FL 33131

Title VDAS  
Name CONSTANTINO, ALICIA  
Address 115 SE 2ND ST 2ND FLOOR  
City-State-Zip: MIAMI FL 33131

Title VS  
Name GOVANTES, CARLOS  
Address 115 SE 2ND ST 2ND FLOOR  
City-State-Zip: MIAMI FL 33131-3153

Title V  
Name TZORTZAKIS, MARIA  
Address 115 SE 2ND ST 2ND FLOOR  
City-State-Zip: MIAMI FL 33131

Title VP  
Name MAVROKORDATOS, EFSTATHIOS  
Address 115 SE 2ND ST  
2ND FLOOR  
City-State-Zip: MIAMI FL 33131

*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:** CARLOS GOVANTES

VS

01/25/2016

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

\_\_\_\_\_  
Date