

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F09000005252

**FILED**  
**Mar 19, 2015**  
**Secretary of State**  
**CC3430809469**

**Entity Name:** THE FRAYMAN GROUP, INC.

**Current Principal Place of Business:**

128 BRIGHTON BEACH AVENUE, STE 400  
BROOKLYN, NY 11235

**Current Mailing Address:**

128 BRIGHTON BEACH AVENUE, STE 400  
BROOKLYN, NY 11235

**FEI Number:** 20-8707596

**Certificate of Status Desired:** No

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

BLUMBERGEXCELSIOR CORPORATE SERVICES, INC.  
155 OFFICE PLAZA DRIVE, 1ST FLOOR  
TALLAHASSEE, FL 32301 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            GAFFNEY, CHRISTOPHER  
Address        ONE LIBERTY SQUARE  
City-State-Zip: BOSTON MA 02109

Title            CEO & SECRETARY  
Name            HALL, JOHN  
Address        200 PORTAGE AVE  
City-State-Zip: PALO ALTO CA 94306

Title            CFO & TREASURER  
Name            ALISHARAN, KYLE  
Address        200 PORTAGE AVE  
City-State-Zip: PALO ALTO CA 02109

Title            ASSISTANT TREASURER  
Name            GERBER, LAURIE  
Address        ONE LIBERTY SQUARE  
City-State-Zip: BOSTON MA 02109

Title            ASSISTANT SECRETARY  
Name            PINTO, SARAH  
Address        ONE LIBERTY SQUARE  
City-State-Zip: BOSTON MA 02109

*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:** KYLE ALISHARAN

**CFO**

**03/19/2015**

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

\_\_\_\_\_  
Date