

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000147494

FILED  
Mar 03, 2011  
Secretary of State

Entity Name: KROME LAND, INC.

**Current Principal Place of Business:**

2600 S DOUGLAS ROAD  
PENTHOUSE 5  
CORAL GABLES, FL 331346143 US

**New Principal Place of Business:**

**Current Mailing Address:**

2600 S DOUGLAS ROAD  
PENTHOUSE 5  
CORAL GABLES, FL 331346143 US

**New Mailing Address:**

FEI Number: 20-0487414

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JORGE OTERO & ASSOCIATES, P.A.  
75 VALENCIA AVENUE  
SUITE 200  
CORAL GABLES, FL 33134 US

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

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

**OFFICERS AND DIRECTORS:**

Title: DPT  
Name: ROSALES, X. FRANCISCO  
Address: 2600 S DOUGLAS ROAD, PH-5  
City-St-Zip: CORAL GABLES, FL 331346143 US

Title: VS  
Name: LEVITT, STEVEN T  
Address: 2600 S DOUGLAS ROAD, PH-5  
City-St-Zip: CORAL GABLES, FL 331346143 US

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: X. FRANCISO ROSALES

DPT

03/03/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date