2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000091217

Entity Name: KERM, INC.

FILED Jan 08, 2005 Secretary of State

pal Place of Business:
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18401 COLLINS AVE 2ND FLOOR

N. MIAMI BEACH, FL 33160 US

Current Mailing Address: New Mailing Address:

18401 COLLINS AVE 2ND FLOOR

N. MIAMI BEACH, FL 33160 US

FEI Number: 65-0543528 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

GEFEN, RACHEL
2750 NE 183RD STREET
32504
AVENTURA, FL 33160 US
GEFEN, MICHAEL
2750 NE 183RD STREET
32504
AVENTURA, FL 33160 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: MICHAEL GEFEN 01/08/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST () Delete Title: VP (X) Change () Addition

 Name:
 GEFEN, RACHEL
 Name:
 GEFEN, MICHAEL

 Address:
 2750 NE 183RD STREET #2504
 Address:
 2750 NE 183RD STREET #2504

City-St-Zip: AVENTURA, FL 33160 City-St-Zip: AVENTURA, FL 33160

Title: () Delete Title: O () Change (X) Addition

Name: Name: GEFEN, ELAD

Address: Address: 2750 NE 183RD STREET #2504

City-St-Zip: Address: 2730 NE 103RD 01REE1 #2504

Only of 21p. 1921410101, 1 E 35100

Title: () Delete Title: O () Change (X) Addition Name: ELAL GEFEN, KAREN

Address: Address: 2750 NE 183RD STREET #2504

City-St-Zip: City-St-Zip: AVENTURA, FL 33160

Title: () Delete Title: O () Change (X) Addition

Name: Name: SHARABY, DALIA

Address: Address: 18401 COLLINS AVE. 2ND FLOOR
City-St-Zip: City-St-Zip: SUNNY ISLES BEACH, FL 33160

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MICHAEL GEFEN VP 01/08/2005