

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 421730

Entity Name: KIMRE, INC..**Current Principal Place of Business:**744 SW 1ST STREET
HOMESTEAD, FL 33030**Current Mailing Address:**744 SW 1ST STREET
HOMESTEAD, FL 33030 US**FEI Number:** 59-1513528**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PEDERSEN, GEORGE C.
744 SW 1ST STREET
HOMESTEAD, FL 33030 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	TD
Name	PEDERSEN, GEORGE C
Address	16201 SW 95 AVE, SUITE 303
City-State-Zip:	MIAMI FL 33157

Title	D
Name	WYATT, JOHANNA
Address	192 SW QUAIL PLACE
City-State-Zip:	FT. WHITE FL 32038

Title	VPD
Name	PEDERSEN, MARIETTA
Address	727 WEST POLE RD
City-State-Zip:	FERNDAL WA 98248-8809

Title	SD
Name	ORR, MARTINE
Address	1010 S ORAIBI CT
City-State-Zip:	PUEBLO WEST CO 81007

Title	PRES, DIRECTOR
Name	KEENAN, MARY R
Address	2235 SE 20TH AVE
City-State-Zip:	HOMESTEAD FL 33035

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: MARY KEENAN**PRESIDENT****03/03/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date