# 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

VP

### above, or on an attachment with all other like empowered. SIGNATURE: JEFFREY C HAND

Electronic Signature of Signing Officer/Director Detail

#### 01/11/2015

#### Date

Date

## FILED Jan 11, 2015 Secretary of State CC0627179502

Certificate of Status Desired: No

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:

Officer/Director Detail :			
Title	DP	Title	DVP
Name	KIENE, JOSEPH H	Name	HAND, JEFFREY
Address	151 CRANDON BLVD, #343	Address	9921 SW 129 STREET
City-State-Zip:	KEY BISCAYNE FL 33149	City-State-Zip:	MIAMI FL 33176

## 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# M49073

Entity Name: KIENE, HAND & COMPANY, P.A.

## **Current Principal Place of Business:**

2730 SW THIRD AVE SUITE 800 MIAMI, FL 33129-2339

## **Current Mailing Address:**

2730 SW THIRD AVENUE SUITE 800 MIAMI, FL 33129-2339 US

## FEI Number: 59-2192453

# Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

LOWMAN, ROBERT M 17302 SW 78 PL MIAMI, FL 33157 US