

**2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000012652

**Entity Name:** DEGRAFF, INC.

**Current Principal Place of Business:**

11110 W. OAKLAND PARK BLVD  
SUITE 214  
SUNRISE, FL 33351

**Current Mailing Address:**

11110 W. OAKLAND PARK BLVD  
SUITE 214  
SUNRISE, FL 33351

**FEI Number:** 20-2287901

**Certificate of Status Desired:** No

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

SCHEINKMAN, MARTIN  
18 N.E. 2ND AVE.  
DANIA BEACH, FL 33004 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            PTD  
Name            DEGRAFF, LYONEL  
Address        9476 NW 39 STREET  
City-State-Zip: SUNRISE FL 33351

*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:** ST. MARCEL LYONEL DEGRAFF

PTD

03/28/2025

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

\_\_\_\_\_  
Date