

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000031904

**Entity Name:** KACOH, INC.

**Current Principal Place of Business:**

10408 W. ATLANTIC BLD.  
CORAL SPRINGS, FL 33071

**Current Mailing Address:**

825 EGRET CIRCLE  
UNIT 109  
DELRAY BEACH, FL 33444

**FEI Number:** 80-0387218

**Certificate of Status Desired:** No

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

COHEN, HARVEY  
825 EGRET CIRCLE  
UNIT 109  
DELRAY BEACH, FL 33444 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            P  
Name            COHEN, HARVEY  
Address        825 EGRET CIRCLE 109  
City-State-Zip: DELRAY BEACH FL 33444

Title            VP  
Name            COHEN, KAREN  
Address        825 EGRET CIRCLE 109  
City-State-Zip: DELRY BEACH FL 33444

*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:** KAREN COHEN

**VICE PRES**

**03/22/2014**

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

\_\_\_\_\_  
Date