

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000073208

Entity Name: KARILISS LABORATORIES INC.

Current Principal Place of Business:

4629, RUE LOUIS B. MAYER
LAVAL, H7P 6-G5

Current Mailing Address:

4629, RUE LOUIS B. MAYER
LAVAL, H7P 6-G5 CA

FEI Number: 30-0798790

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KEEN, DAN
3030 N. ROCKY POINT DRIVE
STE. 150A
TAMPA, FL 33607 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 GERBA, AMINA
Address 4629, RUE LOUIS B. MAYER
City-State-Zip: LAVAL QB H7 P6-G5

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: AMINA GERBA _____

OWNER

03/09/2016

Electronic Signature of Signing Officer/Director Detail

_____ Date