

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000045308

**FILED**  
**Jan 25, 2016**  
**Secretary of State**  
**CC5053015178**

**Entity Name:** DOLPHIN COMPONENTS CORP.

**Current Principal Place of Business:**

1405 POINSETTIA DRIVE  
BLDG G, SUITES 1, 2, 3, 4  
DELRAY BEACH, FL 33444

**Current Mailing Address:**

1405 POINSETTIA DRIVE  
BLDG G, SUITES 1, 2, 3, 4  
DELRAY BEACH, FL 33444

**FEI Number:** 11-2572738

**Certificate of Status Desired:** Yes

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

BRODER, SHARON  
1405 POINSETTIA DRIVE  
BLDG G, SUITES 1, 2, 3, 4  
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:** SHARON BRODER

01/25/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            BRODER, SHARON  
Address        1405 POINSETTIA DRIVE  
                  BLDG G, SUITES 1, 2, 3, 4  
City-State-Zip: DELRAY BEACH FL 33444

Title            VP  
Name            BRODER, SHARON  
Address        1405 POINSETTIA DRIVE, BLDG G,  
                  SUITES 1, 2  
City-State-Zip: DELRAY BEACH FL 33444

Title            OPERATION MANAGER  
Name            DEE, LAURA  
Address        1405 POINSETTIA DRIVE  
                  BLDG G, SUITES 1, 2, 3, 4  
City-State-Zip: DELRAY 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:** LAURA DEE

**OPERATION MANAGER**

01/25/2016

Electronic Signature of Signing Officer/Director Detail

Date