

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 848025

**Entity Name:** CAR KEM PRODUCTS, INC.**Current Principal Place of Business:**4275 ST JOHNS PARKWAY  
SANFORD, FL 32771**Current Mailing Address:**P.O. BOX 471405  
LAKE MONROE, FL 32747**FEI Number:** 52-0625286**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MELITSHKA, WALTER EJR  
225 WOODS TRAIL  
SANFORD, FL 32771 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           | PD                       |
| Name            | MELITSHKA, WALTER E., JR |
| Address         | 225 WOODS TRAIL          |
| City-State-Zip: | SANFORD FL 32771         |

|                 |                         |
|-----------------|-------------------------|
| Title           | V                       |
| Name            | LUCIDO, GREG C          |
| Address         | 9217 NEPTUNES BASIN CT. |
| City-State-Zip: | BOCA RATON FL           |

|                 |                    |
|-----------------|--------------------|
| Title           | STD                |
| Name            | MELITSHKA, SUSAN L |
| Address         | 225 WOODS TRAIL    |
| City-State-Zip: | SANFORD FL 32771   |

*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:** CAR KEM PRODUCTS, INC.**SECRETARY****06/08/2020**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date