The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Flori			
SIGNATURE	: WILLIAM TORRES		
	Electronic Signature of Registered Agent		
Officer/Director Detail :			
Title	PRESIDENT	Title	TREASURER, SECRETARY
Name	FELICIANO BENITEZ, PEDRO A	Name	GONZALEZ CRESPO, JORGE L
Address	PO BOX 2025	Address	PO BOX 2025
City-State-Zip:	SAN JUAN 00936	City-State-Zip:	SAN JUAN 00936
Title	SECRETARY		

DOCUMENT# F06322

Entity Name: KANE CARIBBEAN, INC.

## Current Principal Place of Business:

BO. CANDELARIA CARR #2 K.M. 17.0 TOA BAJA, PR 00949

#### **Current Mailing Address:**

PO BOX 2025 SAN JUAN, 00936 PR

## FEI Number: 66-0386477

Name and Address of Current Registered Agent:

ROMAN MELENDEZ, INEABELLE

PO BOX 2025

City-State-Zip: SAN JUAN 00936

TORRES, WILLIAM 14573 CABLESHIRE WAY ORLANDO, FL 32824 US

Name

Address

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.

PRESIDENT

SIGNATURE: PEDRO A FELICIANO BENITEZ

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

### 2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

# FILED Apr 30, 2018 Secretary of State CC6638593012

04/30/2018 Date

04/30/2018 Date