

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G83027

Entity Name: SS & PM, INC.

FILED
Mar 15, 2011
Secretary of State

Current Principal Place of Business:

2031 N. ATLANTIC AVE
COCOA BEACH, FL 32931

New Principal Place of Business:

2031 N. ATLANTIC AVE
COCOA BEACH, FL 32931 UN

Current Mailing Address:

2031 N. ATLANTIC AVE
COCOA BEACH, FL 32931

New Mailing Address:

2031 N. ATLANTIC AVE
COCOA BEACH, FL 32931 UN

FEI Number: 59-2383782

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YOUNG, DAVID T.
1227 S. FLORIDA AVE
ROCKLEDGE, FL 32955 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: VD
Name: BHIDE, SUDHAKAR B
Address: 1930 PORPOISE ST
City-St-Zip: MERRITT ISLAND, FL 32952 UN

Title: PST
Name: BHIDE, SHOBHA
Address: 1930 PORPOISE ST
City-St-Zip: MERRITT ISLAND, FL 32952 UN

Title: D
Name: BHIDE, SHOBHA
Address: 1930 PORPOISE ST
City-St-Zip: MERRITT ISLAND, FL 32952 UN

Title: D
Name: BHIDE, SUDHAKAR B
Address: 1930 PORPOISE STREET
City-St-Zip: MERRITT ISLAND, SE 32952-564 UN

Title: D
Name: BHIDE, SUDHAKAR B
Address: 1930 PORPOISE ST
City-St-Zip: MERRITT ISLAND, SE 32952-564 UN

Title: D
Name: BHIDE, SUDHAKAR B
Address: 1930 PORPOISE ST
City-St-Zip: MERRITT ISLAND, SE 32952-564 UN

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: SUDHAKAR BHIDE

VD

03/15/2011

Electronic Signature of Signing Officer or Director

Date