

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L39519

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Entity Name:** OLIVER LANGSTADT, P.A.

**Current Principal Place of Business:**

5761 SW 89TH COURT  
MIAMI, FL 33173

**New Principal Place of Business:**

**Current Mailing Address:**

5761 SW 89TH COURT  
MIAMI, FL 33173

**New Mailing Address:**

**FEI Number:** 65-0170926

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LANGSTADT, OLIVER  
815 PONCE DE LEON BOULEVARD  
CORAL GABLES, FL 33134 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: DPS  
Name: LANGSTADT, OLIVER  
Address: 5761 SW 89 COURT  
City-St-Zip: MIAMI, FL 33173

Title: T  
Name: LANGSTADT, OLIVER  
Address: 5761 SW 89 COURT  
City-St-Zip: MIAMI, FL 33173

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: OLIVER J. LANGSTADT

PRES

02/16/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date