

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000048545

Entity Name: TRANSFIGURATION, INC.

FILED  
Apr 20, 2012  
Secretary of State

**Current Principal Place of Business:**

3325 S. UNIVERSITY DRIVE  
STE 123  
DAVIE, FL 33328

**New Principal Place of Business:**

**Current Mailing Address:**

3325 S. UNIVERSITY DRIVE  
STE 123  
DAVIE, FL 33328

**New Mailing Address:**

FEI Number: 65-1008362      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ACEVEDO, UNMI  
14911 NEW CASTLE LANE  
DAVIE, FL 33331      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: PD  
Name: ACEVEDO, UNMI  
Address: 14911 NEW CASTLE LANE  
City-St-Zip: DAVIE, FL 33331

Title: VD  
Name: ACEVEDO, ANGEL  
Address: 14911 NEW CASTLE LANE  
City-St-Zip: DAVIE, FL 33331

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: UNMI ACEVEDO

PD

04/20/2012

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

\_\_\_\_\_ Date