

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000087079

**FILED**  
**Apr 21, 2011**  
**Secretary of State**

**Entity Name:** DEVOVE US, INC.

**Current Principal Place of Business:**

1071 NE 43RD ST.  
OAKLAND PARK, FL 33334

**New Principal Place of Business:**

**Current Mailing Address:**

1071 NE 43RD ST.  
OAKLAND PARK, FL 33334

**New Mailing Address:**

**FEI Number:** 51-0500928

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THIERRY, DEVOVE  
5755 NE 15 AVE  
FORT LAUDERDALE, FL 33334 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:** D  
**Name:** DEVOVE, THIERRY  
**Address:** 5755 NE 15 AVE  
**City-St-Zip:** FORT FAUDERDALE, FL 33334

**Title:** D  
**Name:** DEVOVE, VALERIE  
**Address:** 5755 NE 15 AVE  
**City-St-Zip:** FT LAUDERDALE, FL 33334

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:** THIERRY DEVOVE

MGRM

04/21/2011

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

\_\_\_\_\_  
Date