

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000040101

Entity Name: MUTUAL AID SUPPLIES, INC.

FILED
Apr 14, 2011
Secretary of State

Current Principal Place of Business:

1824 PRAIRIE DUNES CIR N.
LAKELAND, FL 33810 US

New Principal Place of Business:

Current Mailing Address:

1824 PRAIRIE DUNES CIR N.
LAKELAND, FL 33810 US

New Mailing Address:

PO BOX 29
SWEETWATER, TN 37874 US

FEI Number: 68-0604113

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IRIZARRY, CAMELIA
1824 PRAIRIE DUNES CIR N.
LAKELAND, FL 33810 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: P
Name: IRIZARRY, ROBERTO J P/CEO
Address: PO BOX 29
City-St-Zip: SWEETWATER, TN 37874 US

Title: RA
Name: IRIZARRY, CAMELIA RA
Address: 1824 PRAIRIE DUNES CIR N.
City-St-Zip: LAKELAND, FL 33810 US

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: ROBERTO IRIZARRY

P

04/14/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date