

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000092089

**FILED**  
**Apr 11, 2012**  
**Secretary of State**

**Entity Name:** AFFINITY DRIVING SCHOOL, INC.

**Current Principal Place of Business:**

1505 NORTH RIVERSIDE DRIVE  
APT. # 401  
POMPANO BEACH, FL 33062

**New Principal Place of Business:**

2021 NE 24TH STREET  
LIGHTHOUSE POINT, FL 33064

**Current Mailing Address:**

1505 NORTH RIVERSIDE DRIVE  
APT. # 401  
POMPANO BEACH, FL 33062

**New Mailing Address:**

2021 NE 24TH STREET  
LIGHTHOUSE POINT, FL 33064

**FEI Number:** 26-0737254

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SYLVESTER, GABRIELA  
1505 NORTH RIVERSIDE DRIVE  
APT. # 401  
POMPANO BEACH, FL 33062 US

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

SYLVESTER, GABRIELA G  
2021 NE 24TH STREET  
LIGHTHOUSE POINT, FL 33064 US

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: GABRIELA SYLVESTER

04/11/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SYLVESTER, GABRIELA G  
Address: 2021 NE 24TH STREET  
City-St-Zip: LIGHTHOUSE POINT, FL 33064

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: GABRIELA SYLVESTER

P

04/11/2012

Electronic Signature of Signing Officer or Director

Date