

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000106630

**FILED**  
**Jun 12, 2012**  
**Secretary of State**

**Entity Name:** FLORIDA DRAWBRIDGE SERVICES, INC.

**Current Principal Place of Business:**

1901 E. ATLANTIC BLVD  
POMPANO BEACH, FL 33060

**New Principal Place of Business:**

**Current Mailing Address:**

1901 E. ATLANTIC BLVD  
POMPANO BEACH, FL 33060

**New Mailing Address:**

**FEI Number:** 26-3820583

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

PORTER, LAURA  
1901 E. ATLANTIC BLVD  
POMPANO BEACH, FL 33060 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: PVSD  
Name: PORTER, LAURA  
Address: 1901 E. ATLANTIC BLVD  
City-St-Zip: POMPANO BEACH, FL 33060

Title: T  
Name: PORTER, DANIEL  
Address: 1901 E. ATLANTIC BLVD  
City-St-Zip: POMPANO BEACH, FL 33060

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: LAURA PORTER

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06/12/2012

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

\_\_\_\_\_  
Date