

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000002511

**FILED**  
**Jan 06, 2012**  
**Secretary of State**

**Entity Name:** STUART K. HOFFMAN, ESQ., P.A.

**Current Principal Place of Business:**

888 BRICKELL KEY DRIVE  
SUITE 808  
MIAMI, FL 33131

**New Principal Place of Business:**

888 BRICKELL KEY DRIVE  
808  
MIAMI, FL 33131

**Current Mailing Address:**

888 BRICKELL KEY DRIVE  
SUITE 808  
MIAMI, FL 33131

**New Mailing Address:**

888 BRICKELL KEY DRIVE  
808  
MIAMI, FL 33131

**FEI Number:** 26-4033391

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOFFMAN, STUART K  
888 BRICKELL KEY DRIVE  
SUITE 808  
MIAMI, FL 33131 US

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

HOFFMAN, STUART K  
888 BRICKELL KEY DRIVE  
808  
MIAMI, FL 33131 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

01/06/2012

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: HOFFMAN, STUART K  
Address: 888 BRICKELL KEY DRIVE  
City-St-Zip: MIAMI, FL 33131

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: STUART K. HOFFMAN

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

P

01/06/2012

\_\_\_\_\_  
Date