

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000033258

**FILED**  
**Feb 26, 2012**  
**Secretary of State**

**Entity Name:** SOUTH DADE CUSTOMERS SUPPORT SERVICES, INC.

**Current Principal Place of Business:**

8145 NW 7 ST  
MIAMI, FL 33126

**New Principal Place of Business:**

616 NW 26 AVE  
MIAMI, FL 33125

**Current Mailing Address:**

PO BOX 260155  
MIAMI, FL 33126

**New Mailing Address:**

**FEI Number:** 27-0264771

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MARTORELL, BIBIANA  
616 NW 26 AVE  
MIAMI, FL 33125 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: MARTORELL, BIBIANA  
Address: 616 NW 26 AVE  
City-St-Zip: MIAMI, FL 33125

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: BIBIANA MARTORELL

D

02/26/2012

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

\_\_\_\_\_  
Date