

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000040121

**FILED**  
**May 01, 2010**  
**Secretary of State**

**Entity Name:** REVENUE RESTORED INC.

**Current Principal Place of Business:**

16765 FISHHAWK BLVD  
#325  
LITHIA, FL 33547 US

**New Principal Place of Business:**

**Current Mailing Address:**

16765 FISHHAWK BLVD  
#325  
LITHIA, FL 33547 US

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

ACCOUNTING, TAX & FINANCIAL SERVICES, INC  
510 MARCUM ROAD  
LAKELAND, FL 33809 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PRE  
Name: MCGREW, LASANDRA  
Address: 5006 MUIR WAY  
City-St-Zip: LITHIA, FL 33547 US

Title: VP  
Name: MALVEAUX, DEMETRA  
Address: 2818 DUNHILL CIRCLE  
City-St-Zip: LAKELAND, FL 33810

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: FELMAN MALVEAUX

VP

05/01/2010

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

\_\_\_\_\_ Date