

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000027815

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** JOHN A. MAKRIS, CPA, PA.

**Current Principal Place of Business:**

7805 NW BEACON SQUARE BOULEVARD  
SUITE 201  
BOCA RATON, FL 33487

**New Principal Place of Business:**

2300 NW CORPORATE BOULEVARD  
SUITE 236  
BOCA RATON, FL 33431 US

**Current Mailing Address:**

7805 NW BEACON SQUARE BOULEVARD  
SUITE 201  
BOCA RATON, FL 33487

**New Mailing Address:**

2300 NW CORPORATE BOULEVARD  
SUITE 236  
BOCA RATON, FL 33431 US

FEI Number: 65-0915791

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MAKRIS, JOHN A  
7805 NW BEACON SQUARE BOULEVARD  
SUITE 201  
BOCA RATON, FL 33487 US

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

MAKRIS, JOHN A  
2300 NW CORPORATE BOULEVARD  
SUITE 236  
BOCA RATON, FL 33431 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

04/30/2012

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MAKRIS, JOHN A  
Address: 20967 CIRPRES WAY  
City-St-Zip: BOCA RATON, FL 33433

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: JOHN A. MAKRIS

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

PD

04/30/2012

\_\_\_\_\_  
Date