

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 256952

Entity Name: MISTEPEER, INC.

FILED
Aug 17, 2009
Secretary of State

Current Principal Place of Business:

335 GA, STREET
HOLLYWOOD, FL 33019

New Principal Place of Business:

Current Mailing Address:

900 N. NORTH LAKE DR.
HOLLYWOOD, FL 33019

New Mailing Address:

FEI Number: 65-0121431

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSEN, RONALD
4000 HOLLYWOOD BLVD.
STE. 725 SOUTH
HOLLYWOOD, FL 33021 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: SCHERMAN, RUTH
Address: 900 N. NORTH LAKE DRIVE
City-St-Zip: HOLLYWOOD, FL

Title: D () Delete
Name: SCHERMAN, RUTH
Address: 900 N. NORTH LAKE DRIVE
City-St-Zip: HOLLYWOOD, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: SCHERMAN, RUTH
Address: 900 N. NORTH LAKE DRIVE
City-St-Zip: HOLLYWOOD, FL 33019

Title: D (X) Change () Addition
Name: SCHERMAN, RUTH
Address: 900 N. NORTH LAKE DRIVE
City-St-Zip: HOLLYWOOD, FL 33019

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SCHERMAN, RUTH

PST

08/17/2009

Electronic Signature of Signing Officer or Director

Date