## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 446615**

Apr 20, 2011 Secretary of State

Entity Name: SAILES INSURANCE AND BAIL BONDS INC.

**New Principal Place of Business: Current Principal Place of Business:** 

651 17TH STREET WEST

SUITE H

PALMETTO, FL 34221

**Current Mailing Address: New Mailing Address:** 

651 17TH STREET WEST SUITE H

PALMETTO, FL 34221 US

FEI Number: 59-1517129 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SAILES, OSIE M. 651 17TH STREET WEST SUITE H PALMETTO, FL 34221 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 Date

## **OFFICERS AND DIRECTORS:**

Title:

SAILES, OSIE M. Name:

1003 31ST STREET EAST Address: City-St-Zip: PALMETTO, FL 34221 US

Title:

Name: THOMAS, VANZETTA SAILES

P.O. BOX 492 Address:

PALMETTO, FL 34220 US City-St-Zip:

Title:

HOUSTON, GLADYS SAILES Name:

P.O. BOX 52 Address:

City-St-Zip: PALMETTO, FL 34220 US

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: OSIE MAE SAILES **PRES** 04/20/2011