

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 613767

**FILED**  
**Feb 11, 2011**  
**Secretary of State**

**Entity Name:** W. P. B. DESIGN ASSOCIATES, INC.

**Current Principal Place of Business:**

628 88TH ST.  
SURFSIDE, FL 33154

**New Principal Place of Business:**

**Current Mailing Address:**

628 88TH ST.  
SURFSIDE, FL 33154

**New Mailing Address:**

**FEI Number:** 59-2016704

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PELJOVICH, HILDA  
628 88TH ST  
SURFSIDE, FL 33154 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: PD  
Name: PELJOVICH, HILDA  
Address: 628 88TH STREET  
City-St-Zip: SURFSIDE, FL 33154

Title: VD  
Name: BAKALCHUK, MERCEDES  
Address: 9180 EMERSON AVE  
City-St-Zip: SURFSIDE, FL 33154

Title: STD  
Name: WEINTRAUB, ALMA  
Address: 7431 MIAMI VIEW DR.  
City-St-Zip: N BAY VILLAGE, FL 33141

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: HILDA PELJOVICH

PD

02/11/2011

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

\_\_\_\_\_  
Date