

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 650360

FILED  
Apr 26, 2012  
Secretary of State

**Entity Name:** PUBLISHER'S MUTUAL SYSTEMS, INC.

**Current Principal Place of Business:**

6574 N ROUTE 441  
SUITE 237  
COCONUT CREEK, FL 33073 US

**New Principal Place of Business:**

**Current Mailing Address:**

6574 N ROUTE 441  
SUITE 237  
COCONUT CREEK, FL 33073 US

**New Mailing Address:**

**FEI Number:** 65-0582886

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LIPARI, RICHARD  
6574 N ROUTE 441  
SUITE 237  
COCONUT CREEK, FL 33073 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: D  
Name: LIPARI, RICHARD  
Address: 6574 NORTH ROUTE 441 SUITE 237  
City-St-Zip: COCONUT CREEK, FL 33073

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: RICHARD LIPARI

D

04/26/2012

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

\_\_\_\_\_  
Date