

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000003380

FILED  
Feb 15, 2012  
Secretary of State

**Entity Name:** VENGROFF, WILLIAMS & ASSOCIATES INTERNATIONAL, INC.

**Current Principal Place of Business:**

SUITE 101  
203 NE FRONT STREET  
MILFORD, DE 34237

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 50849  
SARASOTA, FL 34232

**New Mailing Address:**

**FEI Number:** 84-1620502

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KING, DAVID L J.D.  
2211 FRUITVILLE RD.  
SARASOTA, FL 34237 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: P  
Name: VENGROFF, MARK  
Address: 2211 FRUITVILLE RD  
City-St-Zip: SARASOTA, FL 34237

Title: VP  
Name: VENGROFF, JOEL VP  
Address: 1 BANKSIDE DRIVE  
City-St-Zip: CENTERPORT, NY 11721

Title: S  
Name: CARINO, KRISTY  
Address: 10 INLET PLACE  
City-St-Zip: HUNTINGTON, NY 11743

Title: CEO  
Name: WILLIAMS, ROBERT  
Address: 2211 FRUITVILLE RD  
City-St-Zip: SARASOTA, FL 34237

Title: CTO  
Name: TOREK, GABE  
Address: 2521 NE 48 STREET  
City-St-Zip: LIGHTHOUSE POINT, FL 33064

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: ROBERT WILLIAMS

CEO

02/15/2012

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

\_\_\_\_\_  
Date