

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000002527

**FILED**  
**Feb 07, 2012**  
**Secretary of State**

**Entity Name:** CAROLYN CORPORATION

**Current Principal Place of Business:**

9260 BAY PLAZA BLVD  
STE501  
TAMPA, FL 33619 US

**New Principal Place of Business:**

9260 BAY PLAZA BLVD  
STE 501  
TAMPA, FL 33619 US

**Current Mailing Address:**

9260 BAY PLAZA BLVD  
STE501  
TAMPA, FL 33619 US

**New Mailing Address:**

9260 BAY PLAZA BLVD  
STE 501  
TAMPA, FL 33619 US

**FEI Number:** 75-2543148

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

ODED, REUVEN  
9260 BAY PLAZA BLVD STE 501  
MIAMI, FL 33134 US

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

ODED, REUVEN  
9260 BAY PLAZA BLVD  
STE 501  
TAMPA, FL 33619 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: REUVEN ODED

02/07/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: ODED, REUVEN  
Address: 9260 BAY PLAZA BLVD STE 501  
City-St-Zip: TAMPA, FL 33619 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: REUVEN ODED

PSTD

02/07/2012

Electronic Signature of Signing Officer or Director

Date