

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H82009

FILED
Jan 10, 2012
Secretary of State

Entity Name: PERSONALLY YOURS SERVICES, INC.

Current Principal Place of Business:

1560 SAWGRASS CORPORATE PARKWAY
4TH FLOOR
SUNRISE, FL 33323

New Principal Place of Business:

Current Mailing Address:

PO BOX 267085
WESTON, FL 333267085

New Mailing Address:

FEI Number: 59-2597845

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REISER, JACQUELINE B PRES
1580 SAWGRASS CORPORATE PARKWAY
SUITE 100
SUNRISE, FL 33323 US

Name and Address of New Registered Agent:

REISER, JACQUELINE B PRES
1560 SAWGRASS CORPORATE PARKWAY
4TH FLOOR
SUNRISE, FL 33323 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

01/10/2012

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: REISER, JACQUELINE B PD
Address: 1560 SAWGRASS CORP. PKWY. - 4TH FLOOR
City-St-Zip: SUNRISE, FL 33323

Title: VP
Name: REISER, MICHAEL R
Address: 1560 SAWGRASS CORP. PKWY. - 4TH FLOOR
City-St-Zip: SUNRISE, FL 33323

Title: VSD
Name: REISER, ELIZABETH M
Address: 1560 SAWGRASS CORP. PKWY. - 4TH FLOOR
City-St-Zip: SUNRISE, FL 33323

Title: DV
Name: REISER, DONALD
Address: 1560 SAWGRASS CORP. PKWY. - 4TH FLOOR
City-St-Zip: SUNRISE, FL 33323

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: MICHAEL R REISER

VP

01/10/2012

Electronic Signature of Signing Officer or Director

Date