

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H93468

Entity Name: REMIZZO INC.

FILED  
Apr 15, 2011  
Secretary of State

**Current Principal Place of Business:**

3730 BELLE VISTA DR.  
ST. PETERSBURG, FL 33706 US

**New Principal Place of Business:**

**Current Mailing Address:**

3730 BELLE VISTA DR.  
ST. PETERSBURG, FL 33706 US

**New Mailing Address:**

FEI Number: 59-2634733

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CHOULS, JOANNA  
3730 BELLE VISTA DRIVE  
ST. PETERSBURG BEACH, FL 33706 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: CHOULS, RAZA  
Address: 3730 BELLE VISTA DR.  
City-St-Zip: SAINT PETERSBURG, FL 33706

Title: S  
Name: CHOULS, JOANNA  
Address: 3730 BELLE VISTA DRIVE  
City-St-Zip: SAINT PETERSBURG, FL 33706

Title: VP  
Name: CHOULS, GILLIAN  
Address: 3730 BELLE VISTA DR.  
City-St-Zip: SAINT PETERSBURG, FL 33706

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: JOANNA CHOULS

S

04/15/2011

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

\_\_\_\_\_  
Date