

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J95042

**FILED**  
**Mar 17, 2011**  
**Secretary of State**

**Entity Name:** MARIA TERESA E. FLORES, INC.

**Current Principal Place of Business:**

118 NORTH NARANJA AVENUE  
PORT ST. LUCIE, FL 34983

**New Principal Place of Business:**

**Current Mailing Address:**

118 NORTH NARANJA AVENUE  
PORT ST. LUCIE, FL 34983

**New Mailing Address:**

**FEI Number:** 65-0010599

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FLORES, MARIA TERESA E  
118 NORTH NARANJA AVENUE  
PORT ST. LUCIE, FL 34983 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:** PT  
**Name:** FLORES, MARIA TERESA E  
**Address:** 118 N. NARANJA AVE.  
**City-St-Zip:** PORT ST. LUCIE, FL 34983

**Title:** VPS  
**Name:** GERARD, FLORES  
**Address:** 118 N. NARANJA AVE.  
**City-St-Zip:** PT. ST LUCIE, FL 34983

**Title:** TREA  
**Name:** FLORES, MARIA T  
**Address:** 118 N. NARANJA AVE.  
**City-St-Zip:** PT. ST. LUCIE, FL 34983

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:** MARIA TERESA E FLORES

PT

03/17/2011

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

\_\_\_\_\_  
Date