

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000025270

Entity Name: IPROFITINTERACTIVE, LLC

**FILED**  
**Mar 07, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1283 TWIN RIVERS BLVD  
OVIEDO, FL 32766

**New Principal Place of Business:**

1754 CARILLON PARK DR  
OVIEDO, FL 32765

**Current Mailing Address:**

1283 TWIN RIVERS BLVD  
OVIEDO, FL 32766

**New Mailing Address:**

1754 CARILLON PARK DR  
OVIEDO, FL 32765

FEI Number: 27-2051241

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SQUITTERI, PAUL  
1283 TWIN RIVERS BLVD  
OVIEDO, FL 32766 US

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

SQUITTERI, PAUL  
1754 CARILLON PARK DR  
OVIEDO, FL 32765 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: PAUL SQUITTERI

03/07/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SQUITTERI, PAUL  
Address: 1754 CARILLON PARK DR  
City-St-Zip: OVIEDO, FL 32765

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: PAUL SQUITTERI

MGRM

03/07/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date