

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L81984

**FILED**  
**Jan 08, 2012**  
**Secretary of State**

**Entity Name:** BENJAMIN MARCANO & ASSOCIATES, P.A., ATTORNEYS AT LAW

**Current Principal Place of Business:**

100 EAST PINE STREET  
STE 607  
ORLANDO, FL 32801 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 3547  
ORLANDO, FL 328023547 US

**New Mailing Address:**

**FEI Number:** 59-3019292

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MARCANO, BENJAMIN  
422 ANESSA ROSE LOOP  
OCOE, FL 347614623 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: PD  
Name: MARCANO, BENJAMIN  
Address: 422 ANESSA ROSE LOOP  
City-St-Zip: OCOE, FL 347614623 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: BENJAMIN MARCANO

PRES

01/08/2012

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

\_\_\_\_\_  
Date