2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2011
Secretary of State

DOCUMENT# M60731

Entity Name: JOHN W. SCHMITZ, P.A.

Current Principal Place of Business:

C/O JOHN W. SCHMITZ, ESQ.
799 BRICKELL PLAZA, SUITE 700
MIAMI, FL 331312805 US

New Principal Place of Business:

JOHN W. SCHMITZ, P.A.
799 BRICKELL PLAZA, SUITE 700
MIAMI, FL 331312805 US

Current Mailing Address:

C/O JOHN W. SCHMITZ, ESQ.
799 BRICKELL PLAZA, SUITE 700
MIAMI, FL 331312805 US

New Mailing Address:

JOHN W. SCHMITZ, P.A.
799 BRICKELL PLAZA, SUITE 700
MIAMI, FL 331312805 US

FEI Number: 65-0009453 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JOHN W. SCHMITZ, ESQ.
799 BRICKELL PLAZA, SUITE 700
MIAMI, FL 331312805 US

Name and Address of New Registered Agent:

SCHMITZ, JOHN W ESQ.
799 BRICKELL PLAZA, SUITE 700
MIAMI, FL 331312805 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: JOHN W. SCHMITZ 01/05/2011
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PSD
Name: JOHN W. SCHMITZ
Address: 375 COCOPLUM ROAD
City-St-Zip: CORAL GABLES, FL 33143

Title: VD
Name: LUCILA SCHMITZ
Address: 375 COCOPLUM ROAD
City-St-Zip: CORAL GABLES, FL 33143

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: JOHN W. SCHMITZ PRES 01/05/2011
Electronic Signature of Signing Officer or Director Date