

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51050

FILED  
Feb 13, 2012  
Secretary of State

**Entity Name:** TRANSFORMERS INTERNATIONAL, INC.

**Current Principal Place of Business:**

421 NE 70 ST.  
MIAMI, FL 33138 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 381881  
MIAMI, FL 33238 US

**New Mailing Address:**

**FEI Number:** 65-0363046

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

REID, PHYLLIS  
421 NE 70 ST.  
MIAMI, FL 33138 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: REID, PHYLLIS T  
Address: 421 NE 70 ST.  
City-St-Zip: MIAMI, FL 33138 US

Title: D  
Name: PESTAINA, SHERYL ANN  
Address: 16702 SW 114 CT.  
City-St-Zip: MIAMI, FL 33157 US

Title: D  
Name: CHIVERTON, MARGARET  
Address: 15 NW 204TH STREET, BLDG C, #2  
City-St-Zip: MIAMI, FL 33169 US

Title: D  
Name: LOPEZ, WILLIAM  
Address: 9001 JACARANDA LANE, #201  
City-St-Zip: PLANTATION, FL 33324 US

Title: D  
Name: SALAZAR, ELSA, MD.  
Address: 9001 JACARANDA LANE #201  
City-St-Zip: PLANTATION, FL 33324 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PHYLLIS T. REID

P

02/13/2012

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

\_\_\_\_\_  
Date