

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000029731

**FILED**  
**Feb 08, 2011**  
**Secretary of State**

**Entity Name:** MONIQUE STECKLEIN, CPA P.A.

**Current Principal Place of Business:**

20 SAN JOSE CIRCLE  
SEDONA, AZ 86336

**New Principal Place of Business:**

30 INSPIRATIONAL DRIVE  
SEDONA, AZ 86336

**Current Mailing Address:**

PO BOX 1608  
SEDONA, AZ 863391608

**New Mailing Address:**

**FEI Number:** 59-3632728

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STECKLEIN, MONIQUE  
367 OSBORNE DRIVE  
FT WALTON BEACH, FL 32548 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: D  
Name: STECKLEIN, MONIQUE CPA  
Address: 30 INSPIRATIONAL DRIVE  
City-St-Zip: SEDONA, AZ 86336

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: MONIQUE STECKLEIN

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02/08/2011

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

\_\_\_\_\_  
Date