

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000056351

**FILED**  
**Mar 23, 2011**  
**Secretary of State**

**Entity Name:** FLORIDA PAYROLL SYSTEMS, INC.

**Current Principal Place of Business:**

C/O PAUL D. HILSEN RATH  
7040 W. PALMETTO PARK RD. # 4-295  
BOCA RATON, FL 33433

**New Principal Place of Business:**

C/O PAUL D. HILSEN RATH  
7050 W. PALMETTO PARK RD. # 4-295  
BOCA RATON, FL 33433

**Current Mailing Address:**

C/O PAUL D. HILSEN RATH, CPA  
7040 W. PALMETTO PARK RD. # 4-295  
BOCA RATON, FL 33433

**New Mailing Address:**

C/O PAUL D. HILSEN RATH, CPA  
7050 W. PALMETTO PARK RD. # 4-295  
BOCA RATON, FL 33433

**FEI Number:** 59-3661403

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HILSEN RATH, PAUL D PRES.  
7040 W. PALMETTO PARK RD.  
4-295  
BOCA RATON, FL 33433 US

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

HILSEN RATH, PAUL D PRES.  
7050 W. PALMETTO PARK RD.  
4-295  
BOCA RATON, FL 33433 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 D. HILSEN RATH

03/23/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** HILSEN RATH, PAUL D  
**Address:** 7050 W. PALMETTO PARK RD. # 4-295  
**City-St-Zip:** BOCA RATON, FL 33433

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:** PAUL D. HILSEN RATH

PRES

03/23/2011

Electronic Signature of Signing Officer or Director

Date