

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000036621

FILED  
Jan 06, 2012  
Secretary of State

Entity Name: RUBEN PERCZEK INC.

**Current Principal Place of Business:**

234 NE 92ND STREET  
MIAMI SHORES, FL 33138

**New Principal Place of Business:**

**Current Mailing Address:**

234 NE 92ND STREET  
MIAMI SHORES, FL 33138

**New Mailing Address:**

FEI Number: 65-1090736

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PERCZEK, SUSANA N  
234 NE 92ND STREET  
MIAMI SHORES, 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: PRES  
Name: PERCZEK, RUBEN  
Address: 234 NE 92ND STREET  
City-St-Zip: MIAMI SHORES, FL 33138

Title: COO  
Name: PERCZEK, SUSANA  
Address: 234 NE 92ND STREET  
City-St-Zip: MIAMI SHORES, FL 33138

Title: PRES  
Name: PERCZEK, RUBEN  
Address: 234 NE 92ND STREET  
City-St-Zip: MIAMI SHORES, FL 33138

Title: PRES  
Name: PERCZEK, RUBEN  
Address: 234 NE 92ND STREET  
City-St-Zip: MIAMI SHORES, FL 33138

Title: PRES  
Name: PERCZEK, RUBEN  
Address: 234 NE 92ND STREET  
City-St-Zip: MIAMI SHORES, FL 33138

Title: PRES  
Name: PERCZEK, RUBEN  
Address: 234 NE 92ND STREET  
City-St-Zip: MIAMI SHORES, FL 33138

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: RUBEN PERCZEK

PRES

01/06/2012

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

\_\_\_\_\_  
Date