

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000084040

Entity Name: PSL CAMEO, INC.

**FILED**  
**Feb 07, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

481 SW PORT ST LUCIE BLVD  
PORT ST LUCIE, FL 34953

**New Principal Place of Business:**

**Current Mailing Address:**

801 SOUTH OLIVE AVE.  
SUITE 1622  
WEST PALM BEACH, FL 33401

**New Mailing Address:**

FEI Number: 26-0020158

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LOGSDON, JOHN  
801 SOUTH OLIVE AVE.  
SUITE 1622  
WEST PALM BEACH, FL 33401 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: PD  
Name: LOGSDON, JOHN  
Address: 801 SOUTH OLIVE AVE. #1622  
City-St-Zip: WEST PALM BEACH, FL 33401

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 LOGSDON

PRES

02/07/2012

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

\_\_\_\_\_  
Date