

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000105897

**FILED**  
**Jan 14, 2012**  
**Secretary of State**

**Entity Name:** SYLVIA PENNA & ASSOCIATES, INC.

**Current Principal Place of Business:**

9700 STIRLING ROAD  
SUITE 107  
COOPER CITY, FL 33024

**New Principal Place of Business:**

1350 NORTH OCEAN BLVD  
4TH FLOOR  
POMPANO BEACH, FL 33062

**Current Mailing Address:**

1600 N OCEAN BLVD  
606  
POMPANO BEACH, FL 33062

**New Mailing Address:**

1350 NORTH OCEAN BLVD  
4TH FLOOR  
POMPANO BEACH, FL 33062

**FEI Number:** 65-1149587

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PENNA, SYLVIA  
1620 N OCEAN BLVD  
606  
POMPANO BEACH, FL 33062 US

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

PENNA, SYLVIA  
1350 NORTH OCEAN BLVD  
4TH FLOOR  
POMPANO BEACH, FL 33062 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: SILVIA PENNA

01/14/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: PENNA, SYLVIA PRES  
Address: 1350 NORTH OCEAN BLVD 4TH FLOOR  
City-St-Zip: POMPANO BEACH, FL 33062

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: SILVIA PENNA

PD

01/14/2012

Electronic Signature of Signing Officer or Director

Date