

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000109049

Entity Name: BUMS, INC..

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

6602 VANDA LANE  
LAND O LAKES, FL 34637

**New Principal Place of Business:**

**Current Mailing Address:**

6602 VANDA LANE  
LAND O LAKES, FL 34637

**New Mailing Address:**

FEI Number: 59-3755238

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SYLVESTER, HERB  
6602 VANDA LANE.  
LAND O LAKES, FL 34637 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: PVST  
Name: SYLVESTER, HERB  
Address: 6602 VANDA LANE.  
City-St-Zip: LAND O LAKES, FL 34637

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: HERB SYLVESTER

OWNE

04/30/2012

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

\_\_\_\_\_  
Date