

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000008244

**FILED**  
**Jan 12, 2012**  
**Secretary of State**

**Entity Name:** KRIS'-TYAN SERVICES INC.

**Current Principal Place of Business:**

5010 E. WHITEWAY DR.  
TAMPA, FL 33617

**New Principal Place of Business:**

5802 E FOWLER AVE  
107A  
TEMPLE TERRACE, FL 33617

**Current Mailing Address:**

5802 E FOWLER AVE  
STE 107A  
TEMPLE TERRACE, FL 33617

**New Mailing Address:**

5802 E FOWLER AVE  
107A  
TEMPLE TERRACE, FL 33617

**FEI Number:** 01-0577696

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WASHINGTON, PAMELA C  
5010 E. WHITWAY DR.  
TAMPA, FL 33617 US

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

WASHINGTON, PAMELA C  
5802 E FOWLER AVE  
107A  
TEMPLE TERRACE, FL 33617 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:

01/12/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P.  
Name: WASHINGTON, SEAN C SR.  
Address: 5802 E FOWLER AVE STE 107A  
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: V  
Name: WASHINGTON, PAMELA C  
Address: 5802 E FOWLER AVE STE 107A  
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: T  
Name: WASHINGTON, PAMELA C  
Address: 5802 E FOWLER AVE STE 107A  
City-St-Zip: TEMPLE TERRACE, FL 33617

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: PAMELA WASHINGTON

VP

01/12/2012

Electronic Signature of Signing Officer or Director

Date