

## **2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P02000013841

**FILED**  
**Dec 20, 2012**  
**Secretary of State**

**Entity Name:** MOBILE MIKE PROMOTIONS, INC.

**Current Principal Place of Business:**

1860 N PINE ISLAND RD, #113  
FORT LAUDERDALE, FL 33322

**New Principal Place of Business:**

701 BRICKELL KEY BOULEVARD  
MIAMI, FL 33131

**Current Mailing Address:**

PO BOX 820444  
S FLORIDA, FL 33082

**New Mailing Address:**

701 BRICKELL KEY BOULEVARD  
MIAMI, FL 33131

**FEI Number:** 20-0262877

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHARRON, LISA E  
1860 N PINE ISLAND RD, #113  
FORT LAUDERDALE, FL 33322 US

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

COVAR, N  
701 BRICKELL KEY BOULEVARD  
MIAMI, FL 33131 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: N COVAR

12/20/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: WAX, LISA  
Address: 701 BRICKELL KEY BOULEVARD  
City-St-Zip: MIAMI, FL 33131

Title: S  
Name: COVAR, N  
Address: 701 BRICKELL KEY BOULEVARD  
City-St-Zip: MIAMI, FL 33131

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: N COVAR

S

12/20/2012

Electronic Signature of Signing Officer or Director

Date