

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000050787

**FILED**  
**Apr 22, 2012**  
**Secretary of State**

**Entity Name:** LUIS CEDENO RESCREENING, INC.

**Current Principal Place of Business:**

2220 N. SEACREAST BLVD  
BOYNTON BEACH, FL 33435 US

**New Principal Place of Business:**

**Current Mailing Address:**

2220 N. SEACREAST BLVD  
BOYNTON BEACH, FL 33435 US

**New Mailing Address:**

**FEI Number:** 71-0888750

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOSE, ANTHONY  
6542 HYPOLOXO RD STE #183  
LAKEWORTH, FL 33467 US

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

KARP, STEVEN Y  
12460 W ATLANTIC BLVD  
CORAL SPRINGS, FL 33071 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:** STEVEN KARP

04/22/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** CEDENO, IHOSVANY L  
**Address:** 2220 NORTH SEACREAST BLVD  
**City-St-Zip:** BOYNTON BCH, FL 33435

**Title:** D  
**Name:** TORRES, MARIA  
**Address:** 2220 NORTH SEACREAST BLVD  
**City-St-Zip:** BOYNTON BCH, FL 33435

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:** IHOSVANY CEDENO

PRES

04/22/2012

Electronic Signature of Signing Officer or Director

Date