

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000074578

Entity Name: BOAL SYSTEMS, INC.

**FILED**  
**Apr 17, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

525 LIVE OAK LN  
WESTON, FL 33327

**New Principal Place of Business:**

**Current Mailing Address:**

525 LIVE OAK LN  
WESTON, FL 33327

**New Mailing Address:**

FEI Number: 04-3700158

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

SAN SEGUNDO, JUAN JOSE  
525 LIVE OAK LN  
WESTON, FL 33327 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: PD  
Name: SAN SEGUNDO, JUAN JOSE  
Address: 525 LIVE OAK LN  
City-St-Zip: WESTON, FL 33327

Title: D  
Name: HUMANES DE FERNANDEZ, MARIA CARMEN  
Address: 525 LIVE OAK LN  
City-St-Zip: WESTON, FL 33327

Title: D  
Name: SAN SEGUNDO, CARMEN ALICIA  
Address: 525 LIVE OAK LN  
City-St-Zip: WESTON, FL 33327

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: CARMEN ALICIA SAN SEGUNDO

MRS

04/17/2012

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

\_\_\_\_\_  
Date