

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000082451

**FILED**  
**Mar 10, 2011**  
**Secretary of State**

**Entity Name:** WIPEOUT TREATS AND SWEETS, INC

**Current Principal Place of Business:**

203 S. FT LAUDERDALE BEACH BLVD.  
FT. LAUDERDALE, FL 33310

**New Principal Place of Business:**

**Current Mailing Address:**

203 S. FT LAUDERDALE BEACH BLVD.  
FT. LAUDERDALE, FL 33310

**New Mailing Address:**

**FEI Number:** 72-1530740

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GAMAL, URI  
203 S. FORT LAUDERDALE BEACH BLVD  
FORT LAUDERDALE, FL 33316 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: P  
Name: MIZRAHI, MOSHE  
Address: 203 S FT. LAUDERDALE BEACH BLVD  
City-St-Zip: FT LAUDERDALE, FL 33310 US

Title: VP  
Name: D'JAMAL, SHLOMO  
Address: 203 S FT. LAUDERDALE BEACH BLVD  
City-St-Zip: FT LAUDERDALE, FL 33310 US

Title: D  
Name: GAMAL, URI  
Address: 203 S FT. LAUDERDALE BEACH BLVD  
City-St-Zip: FT LAUDERDALE, FL 33310 US

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: MOSHE MIZRAHI

P

03/10/2011

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

\_\_\_\_\_  
Date