

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000115575

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

**Entity Name:** LUIS TOUS, P.A.

**Current Principal Place of Business:**

6320 ST. AUGUSTINE RD.  
STE 11  
JACKSONVILLE, FL 32217

**New Principal Place of Business:**

**Current Mailing Address:**

6320 ST AUGUSTINE RD  
STE 11  
JACKSONVILLE, FL 32217

**New Mailing Address:**

**FEI Number:** 71-0913967

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TOUS, LUIS  
6320 ST. AUGUSTINE RD STE 11  
JACKSONVILLE, FL 32217 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: D  
Name: TOUS, LUIS  
Address: 6320 ST. AUGUSTINE RD STE 11  
City-St-Zip: JACKSONVILLE, FL 32217

Title: MR.  
Name: TOUS, LUIS  
Address: 6320 ST. AUGUSTINE ROAD, SUITE 11  
City-St-Zip: JACKSONVILLE, FL 32217 DU

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: LUIS TOUS

D

03/20/2012

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

\_\_\_\_\_  
Date