

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000073565

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

**Entity Name:** CAREER ASSESSMENT VOCATIONAL EVALUATION, INC.

**Current Principal Place of Business:**

5975 WEST SUNRISE BLVD.  
SUITE # 203  
SUNRISE, FL 333136813 US

**New Principal Place of Business:**

**Current Mailing Address:**

5975 WEST SUNRISE BLVD.  
SUITE # 203  
SUNRISE, FL 333136813 US

**New Mailing Address:**

FEI Number: 20-0071038

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JASPER, IVAN P  
5975 W SUNRISE BLVD  
SUITE 203  
SUNRISE, FL 33313 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: PVST  
Name: JASPER, IVAN P  
Address: 5975 WEST SUNRISE BLVD SUITE # 203  
City-St-Zip: SUNRISE, FL 333136813 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: IVAN P JASPER

PVST

02/17/2012

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

\_\_\_\_\_  
Date