

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000151938

**FILED**  
**Apr 12, 2011**  
**Secretary of State**

**Entity Name:** DADE 301 ADULT TOYS & VIDEOS, INCORPORATED

**Current Principal Place of Business:**

15401 US HIGHWAY 301  
DADE CITY, FL 33525

**New Principal Place of Business:**

**Current Mailing Address:**

2327 WOODBEND CIRCLE  
NEW PORT RICHEY, FL 34655

**New Mailing Address:**

**FEI Number:** 41-2119565

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MASTERS, SANDRA  
2327 WOODBEND CIRCLE  
NEW PORT RICHEY, FL 34655 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: PS  
Name: MASTERS, SANDRA  
Address: 2327 WOODBEND CIRCLE  
City-St-Zip: NEW PORT RICHEY, FL 34655 US

Title: VT  
Name: GLUCK, GERALD  
Address: 1551 CROSSVINE COURT  
City-St-Zip: TRINITY, FL 34655 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: SANDRA MASTERS

PRES

04/12/2011

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

\_\_\_\_\_  
Date