

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000158485

Entity Name: A.E.F. OF MARGATE, INC.

**FILED**  
**Apr 23, 2012**  
**Secretary of State**

## **Current Principal Place of Business:**

6550 ROYAL PALM BLVD  
STE 105-A  
MARGATE, FL 33063

## **New Principal Place of Business:**

## **Current Mailing Address:**

6550 ROYAL PALM BLVD  
STE 105-A  
MARGATE, FL 33063

## **New Mailing Address:**

FEI Number: 75-3142592

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FORMIA, JULIA L  
6550 ROYAL PALM BLVD  
STE 105-A  
MARGATE, FL 33063 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: FORMIA, ALDO E  
Address: 6550 ROYAL PALM BLVD, STE 105-A  
City-St-Zip: MARGATE, FL 33063

Title: ST  
Name: FORMIA, JULIA L  
Address: 6550 ROYAL PALM BLVD, STE 105-A  
City-St-Zip: MARGATE, FL 33063

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: ALDO E. FORMIA

P

04/23/2012

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

\_\_\_\_\_  
Date