

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000036169

**Entity Name:** GREG CIPES, INC.

**FILED**  
**Mar 10, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

9541 NW 42ND CT  
CORAL SPRINGS, FL 33065

**New Principal Place of Business:**

**Current Mailing Address:**

9541 NW 42ND CT  
CORAL SPRINGS, FL 33065

**New Mailing Address:**

FEI Number: 20-0782694      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CIPES, GEOFFREY M VP  
9541 NW 42ND CT  
CORAL SPRINGS, FL 33065 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: MR  
Name: CIPES, GREGORY A PRES  
Address: 8409 LOOKOUT MOUNTAIN AVENUE  
City-St-Zip: LOS ANGELES, CA 90046

Title: VP  
Name: CIPES, GEOFFREY A VP  
Address: 9541 NW 42ND CT  
City-St-Zip: CORAL SPRINGS, FL 33065

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: GEOFFREY CIPES

VP

03/10/2012

Electronic Signature of Signing Officer or Director

Date