

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000075311

Entity Name: ANMS, INC.

**FILED**  
**Feb 15, 2012**  
**Secretary of State**

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

6619 SOUTH DIXIE HWY. # 325  
MIAMI, FL 33146

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

6619 SOUTH DIXIE HWY. # 325  
MIAMI, FL 33143

## **Current Mailing Address:**

6619 SOUTH DIXIE HWY. #325  
MIAMI, FL 33143

## **New Mailing Address:**

6619 SOUTH DIXIE HWY. # 325  
MIAMI, FL 33143

FEI Number: 20-1115477

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KLEIN, BRENT D  
2 ALHAMBRA PLAZA  
PENTHOUSE IIB  
CORAL GABLES, FL 33134 US

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

KLEIN, BRENT D  
3850 BIRD ROAD  
303  
MIAMI, FL 33146 US

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:

02/15/2012

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: PD  
Name: SALAZAR, GUILLERMO  
Address: 6619 SOUTH DIXIE HWY. #325  
City-St-Zip: MIAMI, FL 33143

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: GUILLERMO SALAZAR

P

02/15/2012

Electronic Signature of Signing Officer or Director

Date