

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000077496

FILED
Feb 09, 2012
Secretary of State

Entity Name: PROFESSIONAL HANDS INSTITUTE, INC.

Current Principal Place of Business:

10 N.W. 42ND AVE., STE 200
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

10 N.W. 42ND AVE., STE 200
MIAMI, FL 33126

New Mailing Address:

FEI Number: 20-1130497

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRIANA, CARIDAD
10 N.W. 42ND AVE., STE 200
MIAMI, FL 33126 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: TRIANA, CARIDAD
Address: 9351 FONTAINBLUE BLVD.
City-St-Zip: MIAMI, FL 33175

Title: V
Name: RUIZ, NOEL
Address: 6770 SW 48 ST
City-St-Zip: MIAMI, FL 33155

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: CARIDAD TRIANA

P

02/09/2012

Electronic Signature of Signing Officer or Director

Date