

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000084918

Entity Name: DESIREE BARBAZON, P.A.

**FILED**  
**Mar 01, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

6998 NW HWY 27  
SUITE 201  
OCALA, FL 34482

**New Principal Place of Business:**

**Current Mailing Address:**

6998 NW HWY 27  
SUITE 201  
OCALA, FL 34482

**New Mailing Address:**

FEI Number: 20-1186213

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BARBAZON, DESIREE  
4951 SE 212TH CT  
MORRISTON, FL 32686 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: PST  
Name: BARBAZON, DESIREE P.A.  
Address: 4951 SE 212TH CT  
City-St-Zip: MORRISTON, FL 32686

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: DESIREE BARBAZON

PRES

03/01/2011

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

\_\_\_\_\_  
Date