

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000108084

Entity Name: HYPNOLUTION, INC.

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

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

1310 SW 2ND CT  
103  
FT LAUDERDALE, FL 33312

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

1310 SW 2ND CT  
103  
FT LAUDERDALE, FL 33312 UN

## **Current Mailing Address:**

1310 SW 2ND CT  
103  
FT LAUDERDALE, FL 33312

## **New Mailing Address:**

FEI Number: 20-1439142      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

NORRIS, APRIL  
1310 SW 2ND CT  
103  
FT. LAUDERDALE, FL 33312 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: PD  
Name: NORRIS, APRIL  
Address: 106 WILLISTON DR  
City-St-Zip: RUTHERFORDTON, NC 28139

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: APRIL NORRIS

PD

02/23/2012

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

\_\_\_\_\_  
Date