

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000123495

FILED
Jan 13, 2011
Secretary of State

Entity Name: 4 D.R.E.A.M.S. INCORPORATED

Current Principal Place of Business:

2033 TRADE CENTER WAY SUITE 4
#4
NAPLES, FL 34109 US

New Principal Place of Business:

6014 SHIRLEY ST SUITE B
B
NAPLES, FL 34109 US

Current Mailing Address:

2033 TRADE CENTER WAY SUITE 4
#4
NAPLES, FL 34109 US

New Mailing Address:

6014 SHIRLEY ST SUITE B
B
NAPLES, FL 34109 US

FEI Number: 20-1546639

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEINMETZ, ELIEZER
5131 CHERRY WOOD DR
NAPLES, FL 34119 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: STEINMETZ, ELIEZER
Address: 5131 CHERRY WOOD DR
City-St-Zip: NAPLES, FL 34119 US

Title: VP
Name: STEINMETZ, DVORA
Address: 5131 CHERRY WOOD DR
City-St-Zip: NAPLES, FL 34119 US

Title: TREA
Name: STEINMETZ, ELIEZER
Address: 5131 CHERRY WOOD DR
City-St-Zip: NAPLES, FL 34119 US

Title: SECR
Name: STEINMETZ, DVORA
Address: 5131 CHERRY WOOD DR
City-St-Zip: NAPLES, FL 34119 US

Title: P
Name: STEINMETZ, RONIT
Address: 5131 CHERRYWOOD DR
City-St-Zip: NAPLES, FL 34119

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: E STEINMETZ

PRES

01/13/2011

Electronic Signature of Signing Officer or Director

_____ Date