

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000158008

**FILED**  
**Feb 07, 2012**  
**Secretary of State**

**Entity Name:** HOTEL IT MANAGEMENT SERVICES, INC.

**Current Principal Place of Business:**

6297 ROBERTA DR  
ENGLEWOOD, FL 34224

**New Principal Place of Business:**

**Current Mailing Address:**

6297 ROBERTA DR  
ENGLEWOOD, FL 34224

**New Mailing Address:**

**FEI Number:** 20-1921333

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STRAUB, CHRISTIAN  
6297 ROBERTA DR  
ENGLEWOOD, FL 34224 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:** DPS  
**Name:** STRAUB, CHRISTIAN  
**Address:** 6297 ROBERTA DR  
**City-St-Zip:** ENGLEWOOD, FL 34224

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:** CHRISTIAN F STRAUB

PRES

02/07/2012

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

\_\_\_\_\_  
Date