

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000071056

Entity Name: PAS-THRU PRODUCTS, INC.

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4156 SW RIVERS END WAY  
PALM CITY, FL 349907611 US

**New Principal Place of Business:**

**Current Mailing Address:**

4156 SW RIVERS END WAY  
PALM CITY, FL 349907611 US

**New Mailing Address:**

FEI Number: 20-2890655

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KOPLAS & COMPANY, CPA, P.A.  
4285 SW MARTIN HWY  
PALM CITY, FL 34990 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: SHIRLEY, PAUL A  
Address: 4156 SW RIVERS END WAY  
City-St-Zip: PALM CITY, FL 349907611 US

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: PAUL A SHIRLEY

P

04/29/2011

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

\_\_\_\_\_  
Date