

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000149697

**FILED**  
**Apr 28, 2012**  
**Secretary of State**

**Entity Name:** THE LAW OFFICES OF LOUIS GVZMANN, P.A.

**Current Principal Place of Business:**

2290 S. VOLUSIA AVE.,  
H-1  
ORANGE CITY, FL 32763

**New Principal Place of Business:**

1417 N. SEMORAN BLVD.  
SUITE 1  
ORLANDO, FL 32801

**Current Mailing Address:**

PO BOX 390964  
DELTONA, FL 32739

**New Mailing Address:**

**FEI Number:** 20-4529993

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GVZMANN, LOUIS DR.  
2115 ELKCAM BLVD  
DELTONA, FL 32725 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: CEO  
Name: GVZMANN, LOUIS DR.  
Address: 2115 ELKCAM BLVD  
City-St-Zip: DELTONA, FL 32725

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: DR. LOUIS GVZMANN, J.D.

CEO

04/28/2012

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

\_\_\_\_\_  
Date