

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000152117

Entity Name: T.D.S.Y, INC.

**FILED**  
**Apr 05, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

5654 LAWTON DR  
SARASOTA, FL 34233

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1624  
OSPREY, FL 34229

**New Mailing Address:**

FEI Number: 22-3918142

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

YOHANN, LORI  
820 PLACID LAKE DR  
OSPREY, FL 34229 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: PTD  
Name: YOHANN, MOSHE  
Address: 5654 LAWTON DR  
City-St-Zip: SARASOTA, FL 34233

Title: VPSD  
Name: YOHANN, LORI  
Address: 5654 LAWTON DR  
City-St-Zip: SARASOTA, FL 34233

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: LORI YOHANN

VP

04/05/2012

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

\_\_\_\_\_  
Date