

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000154200

Entity Name: WILD STYLE USA, INC.

**FILED**  
**Feb 02, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

12801 VILLAGE BOULEVARD  
MADEIRA BEACH, FL 33708

**New Principal Place of Business:**

**Current Mailing Address:**

C/O S. KRAFT P.A.  
934 NORTH UNIVERSITY DR SUITE 250  
CORAL SPRINGS, FL 33071

**New Mailing Address:**

FEI Number: 22-3918272

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HAMUY, NEIL  
9629 PARKVIEW AVE  
BOCA RATON, FL 33428 US

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

HAMUY, NEIL  
C/O KRAFT PA-934 N UNIVERSITY DR  
250  
CORAL SPRINGS, FL 33071 US

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: NEIL HAMUY

02/02/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: HAMUY, NEIL  
Address: C/O KRAFT PA-934 N UNIVERSITY DR #250  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: D  
Name: HAMUY, JAMIE  
Address: C/O KRAFT PA-934 N UNIVERSITYDR #250  
City-St-Zip: CORAL SPRINGS, FL 33071

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: NEIL HAMUY

PRES

02/02/2011

Electronic Signature of Signing Officer or Director

Date