

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000166058

**FILED**  
**Apr 11, 2010**  
**Secretary of State**

**Entity Name:** FABRICARE PROFESSIONALS INC

**Current Principal Place of Business:**

190 S. RONALD REAGAN BLD  
LONGWOOD, FL 32750

**New Principal Place of Business:**

**Current Mailing Address:**

190 S. RONALD REAGAN BLVD  
LONGWOOD, FL 32750

**New Mailing Address:**

**FEI Number:** 59-0915753

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HEMMS, RICHARD R MR  
1024 MANCHESTER CIRCLE  
WINTER PARK, FL 32792 US

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

HEMMS, RICHARD R MR  
190 S. RONALD REAGAN BLVD  
LONGWOOD, FL 32750 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:** RICHARD R HEMMS

04/11/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PTD  
**Name:** HEMMS, RICHARD R  
**Address:** 190 S. RONALD REAGAN BLVD  
**City-St-Zip:** LONGWOOD, FL 32750

**Title:** S  
**Name:** HEMMS, CHYRLE T  
**Address:** 190 S. RONALD REAGAN BLVD  
**City-St-Zip:** LONGWOOD, FL 32750

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:** RICHARD R HEMMS

PRES

04/11/2010

Electronic Signature of Signing Officer or Director

Date