

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000057381

**FILED**  
**Aug 31, 2012**  
**Secretary of State**

**Entity Name:** THE BACKUP SOLUTIONS, INC.

**Current Principal Place of Business:**

12977 NW 9 ST  
MIAMI, FL 33182

**New Principal Place of Business:**

1853 SW 23 ST  
MIAMI, FL 33145

**Current Mailing Address:**

PO BOX 228194  
MIAMI, FL 33122

**New Mailing Address:**

PO BOX 451911  
MIAMI, FL 33245

**FEI Number:** 20-4782120

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GALEZ, ARGENIS  
12977 NW 9 ST  
MIAMI, FL 33182 US

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

GALEZ, ARGENIS  
1853 SW 23 ST  
MIAMI, FL 33145 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: ARGENIS GALEZ

08/31/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: GALEZ, ARGENIS  
Address: 1853 SW 23 ST  
City-St-Zip: MIAMI, FL 33145

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: ARGENIS GALEZ

PRES

08/31/2012

Electronic Signature of Signing Officer or Director

Date