

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000113406

**Entity Name:** L. MATA ENTERPRISES, INC.

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1005 S. 8TH STREET  
FT PIERCE, FL 34950

**New Principal Place of Business:**

**Current Mailing Address:**

1005 S. 8TH STREET  
FT PIERCE, FL 34950

**New Mailing Address:**

**FEI Number:** 11-3794017

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MATA, LEOBARDO  
1005 S 8TH STREET  
FT PIERCE, FL 34950 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: DPST  
Name: MATA, LEOBARDO  
Address: 1005 SOUTH 8TH STREET  
City-St-Zip: FT PIERCE, FL 34950

Title: DVP  
Name: BARAJAS, ROSA  
Address: 1005 SOUTH 8TH STREET  
City-St-Zip: FT PIERCE, FL 34950

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: LEO MATA

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04/27/2012

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

\_\_\_\_\_  
Date