

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000128012

**Entity Name:** PLOUIS & ASSOCIATES, INC.

**FILED**  
**Jan 20, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

900 NE 195TH STREET SUITE 607  
MIAMI, FL 33179

**New Principal Place of Business:**

900 NE 195TH STREET  
SUITE 607  
MIAMI, FL 33179

**Current Mailing Address:**

900 NE 195TH STREET SUITE 607  
MIAMI, FL 33179

**New Mailing Address:**

900 NE 195TH STREET  
SUITE 607  
MIAMI, FL 33179

**FEI Number:** 20-5598530

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LOUIS, PATRICIA  
900 NE 195TH STREET SUITE 607  
MIAMI, FL 33179 US

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

LOUIS-MILLS, PATRICIA  
900 NE 195TH STREET  
SUITE 607  
MIAMI, FL 33179 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: PATRICIA LOUIS- MILLS

01/20/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: LOUIS-MILLS, PATRICIA  
Address: 900 NE 195TH STREET SUITE 607  
City-St-Zip: MIAMI, FL 33179

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: PATRICIA LOUIS -MILLS

CEO

01/20/2011

Electronic Signature of Signing Officer or Director

Date