

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000142421

**FILED**  
**Apr 29, 2012**  
**Secretary of State**

**Entity Name:** SUCCESSFUL BUSINESSES CORP

**Current Principal Place of Business:**

1000 PONCE DE LEON BLVD  
SUITE 318  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

1000 PONCE DE LEON BLVD  
SUITE 318  
CORAL GABLES, FL 33134

**New Mailing Address:**

**FEI Number:** 20-5880691

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PALACIO, ANA  
1000 PONCE DE LEON BLVD  
SUITE 318  
CORAL GABLES, FL 33134 US

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

PARRA, FABIO  
1000 PONCE DE LEON BLVD  
SUITE 318  
CORAL GABLES, FL 33134 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: FABIO PARRA

04/29/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: PARRA, FABIO  
Address: 1000 PONCE DE LEON BLVD # 318  
City-St-Zip: CORAL GABLES, FL 33134

Title: VP  
Name: PALACIO, ANA  
Address: 1000 PONCE DE LEON BLVD # 318  
City-St-Zip: CORAL GABLES, FL 33134

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: FABIO PARRA

P

04/29/2012

Electronic Signature of Signing Officer or Director

Date