

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000153486

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** 5TH AVE FINANCIAL GROUP, INC.

**Current Principal Place of Business:**

3800 WASHINGTON RD #1202  
WEST PALM BEACH, FL 33405 US

**New Principal Place of Business:**

6815 MONMOUTH RD  
WEST PALM BEACH, FL 33405

**Current Mailing Address:**

PO BOX 6065  
WEST PALM BEACH, FL 33405 US

**New Mailing Address:**

PO BOX 6065  
WEST PALM BEACH, FL 33405

**FEI Number:** 20-0871570

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RESTREPO, SHARON  
3800 WASHINGTON RD #1202  
WEST PALM BEACH, FL 33405 US

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

C.R. COOPER, CPA  
1495 FOREST HILL BLVD  
SUITE B  
WEST PALM BEACH, FL 33406 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: C.R.COOPER, CPA

04/30/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: RESTREPO, SHARON  
Address: PO BOX 6065  
City-St-Zip: WEST PALM BEACH, FL 33405 US

Title: VP  
Name: RESTREPO, JUAN C  
Address: PO BOX 6065  
City-St-Zip: WEST PALM BEACH, FL 33405 US

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: JUAN C RESTREPO

VP

04/30/2012

Electronic Signature of Signing Officer or Director

Date