

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000024555

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** BUSINESS LICENSE SOLUTIONS CORP.

**Current Principal Place of Business:**

8857 SW 96 AVENUE  
MIAMI, FL 33176

**New Principal Place of Business:**

3411 SW 64TH AVENUE  
MIAMI, FL 33155

**Current Mailing Address:**

8857 SW 96 AVENUE  
MIAMI, FL 33176

**New Mailing Address:**

3411 SW 64TH AVENUE  
MIAMI, FL 33155

**FEI Number:** 20-8562570

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CENDAN-PEREZ, LISETTE  
8857 SW 96 AVENUE  
MIAMI, FL 33176 US

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

CENDAN-PEREZ, LISETTE  
3411 SW 64TH AVENUE  
MIAMI, FL 33155 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

04/28/2011

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P/S  
Name: CENDAN-PEREZ, LISETTE  
Address: 3411 SW 64TH AVENUE  
City-St-Zip: MIAMI, FL 33155

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: LISETTE CENDAN-PEREZ

P/S

04/28/2011

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

\_\_\_\_\_  
Date