

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000029695

Entity Name: MASTERS L.S., INC.

**FILED**  
**Jul 31, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

150 RIVERSHORE DR.  
SAN MATEO, FL 32187

**New Principal Place of Business:**

**Current Mailing Address:**

150 RIVERSHORE DR.  
SAN MATEO, FL 32187

**New Mailing Address:**

FEI Number: 75-3243018

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KEYSER, TIMOTHY  
150 RIVERSHORE DR.  
SAN MATEO, FL 32187 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: PRES  
Name: MASTERS, LAWRENCE J PRES.  
Address: 150 RIVERSHORE DRIVE  
City-St-Zip: SAN MATEO, FL 32187

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: LAWRENCE J MASTERS

PRES

07/31/2012

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

\_\_\_\_\_  
Date