

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000056735

FILED  
Sep 27, 2012  
Secretary of State

**Entity Name:** TRAVIESO ENTERPRISES INC.

**Current Principal Place of Business:**

14801 E. TETHERCLIFT ST  
DAVIE, FL 33331

**New Principal Place of Business:**

**Current Mailing Address:**

14801 E. TETHERCLIFT ST  
DAVIE, FL 33331

**New Mailing Address:**

**FEI Number:** 26-0235488

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TRAVIESO, LOURDES  
14801 E. TETHERCLIFT ST  
DAVIE, FL 33331 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:** P  
**Name:** TRAVIESO, LOURDES  
**Address:** 14801 E. TETHERCLIFT ST  
**City-St-Zip:** DAVIE, FL 33331

**Title:** VP  
**Name:** TRAVIESO, RENE  
**Address:** 14801 E. TETHERCLIFT ST  
**City-St-Zip:** DAVIE, FL 33331

**Title:** T  
**Name:** TRAVIESO, LOURDES  
**Address:** 14801 E. TETHERCLIFT ST  
**City-St-Zip:** DAVIE, FL 33331

**Title:** S  
**Name:** TRAVIESO, RENE  
**Address:** 14801 E. TETHERCLIFT ST  
**City-St-Zip:** DAVIE, FL 33331

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:** LOURDES TRAVIESO

P

09/27/2012

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

\_\_\_\_\_  
Date