

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000086956

**FILED**  
**Apr 27, 2011**  
**Secretary of State**

**Entity Name:** CELO PROFESSIONAL SERVICES INC

**Current Principal Place of Business:**

610 TRACE CIR APT 102  
DEERFIELD BEACH, FL 33441

**New Principal Place of Business:**

610 TRACE CIR  
102  
DEERFIELD BEACH, FL 33441

**Current Mailing Address:**

610 TRACE CIR APT 102  
DEERFIELD BEACH, FL 33441

**New Mailing Address:**

610 TRACE CIR  
102  
DEERFIELD BEACH, FL 33441

**FEI Number:** 42-1735560

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DE LIMA, MARCELO  
610 TRACE CIR APT 102  
DEERFIELD BEACH, FL 33441 US

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

DE LIMA, MARCELO  
610 TRACE CIR  
102  
DEERFIELD BEACH, FL 33441 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:** MARCELO

04/27/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** DE LIMA, MARCELO  
**Address:** 610 TRACE CIR APT 102  
**City-St-Zip:** DEERFIELD BEACH, FL 33441

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:** MARCELO DE LIMA

P

04/27/2011

Electronic Signature of Signing Officer or Director

Date