

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000109685

Entity Name: RACHEL BOBA PHD INC

**FILED**  
**Feb 16, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

3215 SE WEST SNOW ROAD  
PORT ST LUCIE, FL 34984

**New Principal Place of Business:**

**Current Mailing Address:**

3215 SE WEST SNOW ROAD  
PORT ST LUCIE, FL 34984

**New Mailing Address:**

FEI Number: 26-1186538

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BOBA, RACHEL  
3215 SE WEST SNOW ROAD  
PORT ST LUCIE, FL 34984 US

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

SANTOS, RACHEL B DR  
3215 SE WEST SNOW ROAD  
PORT ST LUCIE, FL 34984 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: RACHEL BOBA SANTOS

02/16/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SANTOS, RACHEL B DR.  
Address: 3215 SE WEST SNOW ROAD  
City-St-Zip: PORT ST LUCIE, FL 34984

Title: VP  
Name: SANTOS, ROBERTO G  
Address: 3215 SE WEST SNOW RD  
City-St-Zip: PORT ST LUCIE, FL 34984

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: RACHEL BOBA SANTOS

P

02/16/2012

Electronic Signature of Signing Officer or Director

Date