

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000006677

Entity Name: ITGOES.COM, INC.

**FILED**  
**Jan 30, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

3515 N.W. 114TH AVE.  
DORAL, FL 33178

**New Principal Place of Business:**

**Current Mailing Address:**

3515 N.W. 114TH AVE.  
DORAL, FL 33178

**New Mailing Address:**

FEI Number: 32-0230469

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

POZO, IMARI M  
5875 COLLINS AVE #1101  
MIAMI BEACH, FL 33140 US

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

POZO, IMARI M  
4953 NW 94 TH DORAL PL  
DORAL, FL 33178 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

01/30/2012

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: POZO, IMARI M  
Address: 4953 NW 94 TH DORAL PL  
City-St-Zip: DORAL, FL 33178 US

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: IMARI POZO

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

P

01/30/2012

\_\_\_\_\_  
Date