

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000009588

Entity Name: HEFZI-BA, INC.

**FILED**  
**Apr 18, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

571 NORTH SEMORAN BLVD  
ORLANDO, FL 32827

**New Principal Place of Business:**

571 NORTH SEMORAN BLVD  
ORLANDO, FL 32807

**Current Mailing Address:**

571 NORTH SEMORAN BLVD  
ORLANDO, FL 32827

**New Mailing Address:**

571 NORTH SEMORAN BLVD  
ORLANDO, FL 32807

FEI Number: 26-1841854

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROSADO, LIZZETTE  
754 BATTERY POINTS DR  
ORLANDO, FL 32828 US

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

ROSADO, LIZZETTE  
754 BATTERY POINTS DR  
ORLANDO, FL 32807 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:

04/18/2011

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: ROSADO, LIZZETTE  
Address: 571 NORTH SEMORAN BLVD  
City-St-Zip: ORLANDO, FL 32807

Title: DST  
Name: ROSADO, FRANCISCO  
Address: 571 NORTH SEMORAN BLVD  
City-St-Zip: ORLANDO, FL 32807

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: LIZZETTE ROSADO

DP

04/18/2011

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

\_\_\_\_\_  
Date