

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000023609

Entity Name: THOMAS A. ROBES, P.A.

FILED  
Jan 06, 2012  
Secretary of State

**Current Principal Place of Business:**

730 SOUTH FEDERAL HIGHWAY  
LAKE WORTH, FL 33460 US

**New Principal Place of Business:**

117 NE 5TH AVENUE  
SUITE A  
DELRAY BEACH, FL 33483 US

**Current Mailing Address:**

730 SOUTH FEDERAL HIGHWAY  
LAKE WORTH, FL 33460 US

**New Mailing Address:**

117 NE 5TH AVENUE  
SUITE A  
DELRAY BEACH, FL 33483 US

FEI Number: 26-2238685

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROBES, THOMAS A  
730 SOUTH FEDERAL HIGHWAY  
LAKE WORTH, FL 33460 US

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

ROBES, THOMAS A  
117 NE 5TH AVENUE  
SUITE A  
DELRAY BEACH, FL 33483 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

01/06/2012

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P,D  
Name: ROBES, THOMAS A  
Address: 117 NE 5TH AVENUE, SUITE A  
City-St-Zip: DELRAY BEACH, FL 33483 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: THOMAS A, ROBES

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

P.D.

01/06/2012

\_\_\_\_\_  
Date