

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000068531

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

**Entity Name:** LOSSEN FINANCIAL INC.

**Current Principal Place of Business:**

707 3RD AVE  
STE 300  
FORT LAUDERDALE, FL 33301

**New Principal Place of Business:**

2415 NE 8TH ST  
FORT LAUDERDALE, FL 33304

**Current Mailing Address:**

2415 NE 8TH ST  
FORT LAUDERDALE, FL 33304

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired ( )**

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

BERNSTEIN, JOSEPH  
707 SE 3RD AVENUE  
STE 300  
FORT LAUDERDALE, FL 33316 US

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

APD 1 INC  
1915 NE 45TH ST  
SUITE 101  
FORT LAUDERDALE, FL 33308 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: C FARAH

Electronic Signature of Registered Agent

04/30/2012

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: ARMISTEAD, ROBERT G  
Address: 2415 NE 8TH ST  
City-St-Zip: FORT LAUDERDALE, FL 33304

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: R ARMISTEAD

D

04/30/2012

Electronic Signature of Signing Officer or Director

Date