

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000070652

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Entity Name:** ON LINE MERCHANDISING, INC.

**Current Principal Place of Business:**

10895 NW 50TH STREET  
SUNRISE, FL 33351

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 771448  
CORAL SPRINGS, FL 33077

**New Mailing Address:**

10895 NW 50TH STREET  
SUNRISE, FL 33351

**FEI Number:** 26-3215085

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MOLINA, LARRY  
10895 NW 50TH STREET  
SUNRISE, FL 33351 US

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

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MOLINA, LARRY  
Address: 10895 NW 50TH STREET  
City-St-Zip: SUNRISE, FL 33351

Title: V  
Name: KEARNS, JAMES  
Address: 3909 W COUNTRY HILLS LANE  
City-St-Zip: SPOKANE, WA 99208

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:** LARRY MOLINA

PRES

04/27/2012

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

\_\_\_\_\_  
Date