## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000071376

Entity Name: BUSINESS ADVISORY PARTNERS INC.

**FILED** Mar 25, 2011 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

541 ALHAMBRA CIRCLE 35 GROVE STREET CORAL GABLES, FL 33134 US

1G

NEW YORK, NY 10014 US

**Current Mailing Address: New Mailing Address:** 

541 ALHAMBRA CIRCLE 35 GROVE STREET

CORAL GABLES, FL 33134 US

NEW YORK, NY 10014 US

FEI Number: 26-3089330 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GOMEZ, STEVEN TANG, NGOC 541 ALHAMBRA CIRCLE 7351 WILES ROAD

CORAL GABLES, FL 33134 US CORAL SPRINGS, FL 33067 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: NGOC TANG 03/25/2011

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PRFS

GOMEZ, STEVEN Name: 35 GROVE STREET 1G Address: City-St-Zip: NEW YORK, NY 10014 US

Title: **TRES** 

GOMEZ, STEVEN Name: 35 GROVE STREET 1G Address: NEW YORK, NY 10014 US City-St-Zip:

Title: SECT

GOMEZ, STEVEN Name: 35 GROVE STREET Address: City-St-Zip: NEW YORK, NY 10014 US

Title: DIR

GOMEZ, STEVEN Name: Address: 35 GROVE STREET City-St-Zip: NEW YORK, NY 10014 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: STEVEN GOMEZ **PRES** 03/25/2011