

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000071411

FILED  
Jan 06, 2011  
Secretary of State

Entity Name: POISSON CRU CORP

**Current Principal Place of Business:**

4295 BONITA BEACH ROAD  
BONITA SPRINGS, FL 34134 US

**New Principal Place of Business:**

**Current Mailing Address:**

4295 BONITA BEACH ROAD  
BONITA SPRINGS, FL 34134 US

**New Mailing Address:**

FEI Number: 26-3123982

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ACOL, JESSICA  
19851 BRECKENRIDGE DR.  
504  
ESTERO, FL 33928 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, D  
Name: ACOL, JESSICA  
Address: 19851 BRECKENRIDGE DR. #504  
City-St-Zip: ESTERO, FL 33928 US

Title: S, T  
Name: ACOL, JESSICA  
Address: 19851 BRECKENRIDGE DR. #504  
City-St-Zip: ESTERO, FL 33928 US

Title: D  
Name: ACOL, JEFFREY  
Address: 19851 BRECKENRIDGE DR. #504  
City-St-Zip: ESTERO, FL 33928 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: JESSICA ACOL

P.D

01/06/2011

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

\_\_\_\_\_  
Date