

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000079877

**FILED**  
**Jan 23, 2012**  
**Secretary of State**

**Entity Name:** BILINGUAL MEDIATORS INC.

**Current Principal Place of Business:**

5220 SOUTH UNIVERSITY DRIVE  
SUITE 205C  
FT LAUDERDALE, FL 33328

**New Principal Place of Business:**

**Current Mailing Address:**

5220 SOUTH UNIVERSITY DRIVE  
SUITE 205C  
FT LAUDERDALE, FL 33328

**New Mailing Address:**

**FEI Number:** 94-3448582      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

SIDELLA, BRIAN K  
13061 PARKSIDE TERRACE  
COOPER CITY, FL 33330 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:** SANTA MARIA, DIANA  
**Address:** 5220 SOUTH UNIVERSITY DRIVE  
**City-St-Zip:** FT LAUDERDALE, FL 33328

**Title:** VP  
**Name:** SIDELLA, BRIAN K  
**Address:** 5220 SOUTH UNIVERSITY DRIVE  
**City-St-Zip:** FT LAUDERDALE, FL 33328 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: DIANA SANTA MARIA

PRES

01/23/2012

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

\_\_\_\_\_ Date