

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000085375

Entity Name: AUTOMATED APPS, INC.

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

**Current Principal Place of Business:**

5318 N.W. 49TH COURT  
COCONUT CREEK, FL 33073 US

**New Principal Place of Business:**

**Current Mailing Address:**

5318 N.W. 49TH COURT  
COCONUT CREEK, FL 33073 US

**New Mailing Address:**

FEI Number: 26-3372241

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MICHAEL BERRY  
5318 NW 49TH COURT  
COCONUT CREEK, FL 33063 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: BERRY, MICHAEL  
Address: 5318 N.W. 49TH COURT  
City-St-Zip: COCONUT CREEK, FL 33073 US

Title: S  
Name: BERRY, MICHAEL  
Address: 5318 N.W. 49TH COURT  
City-St-Zip: COCONUT CREEK, FL 33073 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: MICHAEL BERRY

P

04/30/2012

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

\_\_\_\_\_  
Date