

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000107888

Entity Name: SUBLISTYLE, INC.

**FILED**  
**Mar 16, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

15 SUNSHINE BLVD  
ORMOND BEACH, FL 32174

**New Principal Place of Business:**

**Current Mailing Address:**

15 SUNSHINE BLVD  
ORMOND BEACH, FL 32174

**New Mailing Address:**

FEI Number: 26-3907401

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BERTELE', ANDREA  
15 SUNSHINE BLVD  
ORMOND BEACH, FL 32174 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: BERTELE', ANDREA  
Address: 15 SUNSHINE BLVD  
City-St-Zip: ORMOND BEACH, FL 32174

Title: ST  
Name: BERTELE', SABRINA A  
Address: 15 SUNSHINE BLVD  
City-St-Zip: ORMOND BEACH, FL 32174

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: ANDREA BERTELE

P

03/16/2011

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

\_\_\_\_\_  
Date