

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000001631

**FILED**  
**Apr 29, 2010**  
**Secretary of State**

**Entity Name:** THE PLACE OF YOUR PRESENCE, INC.

**Current Principal Place of Business:**

691 SOUTH HOLLYBROOK DRIVE  
BUILD. 26 APT. 207  
PEMBROKE PINES, FL 33025

**New Principal Place of Business:**

4333 SW 20TH PLACE  
CAPE CORAL, FL 33914

**Current Mailing Address:**

691 SOUTH HOLLYBROOK DRIVE  
BUILD. 26 APT. 207  
PEMBROKE PINES, FL 33025

**New Mailing Address:**

4333 SW 20TH PLACE  
CAPE CORAL, FL 33914

**FEI Number:** 26-4018676

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JUAN J. PEREZ & ASSOCIATES P.A.  
8569 PINES BLVD.  
SUITE #216  
PEMBROKE PINES, FL 33024 US

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

JUAN J. PEREZ & ASSOCIATES P.A.  
8527 PINES BLVD.  
SUITE #201  
PEMBROKE PINES, FL 33024 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: JUAN J PEREZ

04/29/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P, D  
Name: MALAGON, CESAR A  
Address: 4333 SW 20TH PLACE  
City-St-Zip: CAPE CORAL, FL 33914

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: CESAR MALAGON

P,D

04/29/2010

Electronic Signature of Signing Officer or Director

Date