

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000022157

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Entity Name:** AMERICAN CREDIT MONITORING, INC.

**Current Principal Place of Business:**

6574 N. STATE RD7  
SUITE 146  
COCONUT CREEK, FL 33073

**New Principal Place of Business:**

**Current Mailing Address:**

6574 N. STATE RD7  
SUITE 146  
COCONUT CREEK, FL 33073

**New Mailing Address:**

**FEI Number:** 26-4433329

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COLLINS, TOM  
1713 SW 19TH CT  
BOYNTON BEACH, FL 33426 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: COLLINS, TOM  
Address: 1713 SW 19TH CT  
City-St-Zip: BOYNTON BEACH, FL 33426

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: TOM COLLINS

PRES

05/01/2012

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

\_\_\_\_\_  
Date