

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000028879

Entity Name: HUEMOZ, INC.

FILED
Mar 21, 2011
Secretary of State

Current Principal Place of Business:

2205 SOUTH UNIVERSITY DRIVE
DAVIE, FL 333245813

New Principal Place of Business:

Current Mailing Address:

2205 SOUTH UNIVERSITY DRIVE
DAVIE, FL 333245813

New Mailing Address:

FEI Number: 26-4779809

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIRO, CYRIL S
2205 SOUTH UNIVERSITY DRIVE
DAVIE, FL 333245813 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: D
Name: BROWNLEE, PAMELA
Address: 2205 SOUTH UNIVERSITY DRIVE
City-St-Zip: DAVIE, FL 333245813

Title: D
Name: COHEN, STEPHEN
Address: 2205 SOUTH UNIVERSITY DRIVE
City-St-Zip: DAVIE, FL 333245813

Title: D
Name: SPIRO, CYRIL S
Address: 2205 SOUTH UNIVERSITY DRIVE
City-St-Zip: DAVIE, FL 333245813

Title: D
Name: LECORGNE, NEILL
Address: 2205 SOUTH UNIVERSITY DRIVE
City-St-Zip: DAVIE, FL 333245813

Title: D
Name: MAZZA, DAVID
Address: 2205 SOUTH UNIVERSITY DRIVE
City-St-Zip: DAVIE, FL 333245813

Title: D
Name: OWENS, PAMELA J
Address: 2205 SOUTH UNIVERSITY DRIVE
City-St-Zip: DAVIE, FL 333245813

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: CYRIL S SPIRO

D

03/21/2011

Electronic Signature of Signing Officer or Director

Date