

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000042679

Entity Name: DELRAY JUICE BAR, INC.

**FILED**  
**Feb 21, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

5030 W ATLANTIC AVE  
DELRAY BEACH, FL 33445 US

## **New Principal Place of Business:**

## **Current Mailing Address:**

572 NW 45TH DRIVE  
DELRAY BEACH, FL 33445 US

## **New Mailing Address:**

5630 W ATLANTIC AVE  
104  
DELRAY BEACH, FL 33484 US

FEI Number: 27-0181501

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SANABRIA, MARK  
572 NW 45TH DRIVE  
DELRAY BEACH, FL 33445 US

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

SANABRIA, MARK  
5630 W ATLANTIC AVE  
104  
DELRAY BEACH, FL 33484 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: MARK SANABRIA

02/21/2011

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: PTD  
Name: SANABRIA, MARK  
Address: 5630 WEST ATLANTIC AVE #104  
City-St-Zip: DELRAY BEACH, FL 33445 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: MARK SANABRIA

PTD

02/21/2011

Electronic Signature of Signing Officer or Director

Date