

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000061042

FILED
Apr 27, 2011
Secretary of State

Entity Name: REST ASSURED MULTI- SERVICES, CORP.

Current Principal Place of Business:

18459 PINES BLVD.
SUITE 241
PEMBROKE PINES, FL 33029

New Principal Place of Business:

Current Mailing Address:

18459 PINES BLVD.
SUITE 241
PEMBROKE PINES, FL 33029

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MICHEL, JEAN
18459 PINES BLVD.
SUITE 241
PEMBROKE PINES, FL 33029 US

Name and Address of New Registered Agent:

TONY, JEAN-MICHEL
18459 PINES BLVD.
SUITE 241
PEMBROKE PINES, FL 33029 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: JEAN-MICHEL TONY

04/27/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PMGR
Name: MURIELLE, JOSEPH
Address: 18459 PINES BLVD.
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: D
Name: TONY, JEAN-MICHEL
Address: 18459 PINES BLVD.
City-St-Zip: PEMBROKE PINES, FL 33029

Title: MGR
Name: TONY, MARIE
Address: 18459 PINES BLVD
City-St-Zip: PEMBROKE PINES, FL 33029

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: JEAN-MICHEL TONY

RA

04/27/2011

Electronic Signature of Signing Officer or Director

Date