

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000085220

Entity Name: CASA BUENA INC

**FILED**  
**Jan 06, 2011**  
**Secretary of State**

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

3944 SUMMER PINES DR  
JACKSONVILLE, FL 32257

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

4651 SALISBURY RD  
4044  
JACKSONVILLE, FL 32256 US

## **Current Mailing Address:**

3944 SUMMER PINES DR  
JACKSONVILLE, FL 32257

## **New Mailing Address:**

PO BOX 32364  
JACKSONVILLE, FL 32237 US

FEI Number: 27-1112336

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DENNIS, BARBARA  
3944 SUMMER PINES DR  
JACKSONVILLE, FL 32257 US

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

DENNIS, BARBARA  
4651 SALISBURY RD  
4044  
JACKSONVILLE, FL 32256 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: B DENNIS

01/06/2011

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: PST  
Name: DENNIS, BARBARA  
Address: 4651 SALISBURY RD STE 4044  
City-St-Zip: JACKSONVILLE, FL 32256

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: B DENNIS

PST

01/06/2011

Electronic Signature of Signing Officer or Director

Date