# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Sep 27, 2012**
**Secretary of State**

DOCUMENT# P10000007124

**Entity Name:** NO WORRIES 4 U, INC.

**Current Principal Place of Business:**

2903 EVANS WAY
KISSIMMEE, FL 34758 US

**New Principal Place of Business:**

**Current Mailing Address:**

2903 EVANS WAY
KISSIMMEE, FL 34758 US

**New Mailing Address:**

**FEI Number: 27-1770238** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

FOUNTAIN, CHRISTINA
2903 EVANS WAY
KISSIMMEE, FL 34758 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: PTD
Name: FOUNTAIN, CHRISTINA
Address: 2903 EVANS WAY
City-St-Zip: KISSIMMEE, FL 34758 US

Title: VS
Name: FOUNTAIN, RODD
Address: 2903 EVANS WAY
City-St-Zip: KISSIMMEE, FL 34758 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: CHRISTINA FOUNTAIN PRES 09/27/2012

Electronic Signature of Signing Officer or Director Date