

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000017952

**FILED**  
**May 01, 2011**  
**Secretary of State**

**Entity Name:** FLORIDA SHORT SALE MITIGATORS INC.

**Current Principal Place of Business:**

1522 NE 34 CT  
10  
OAKLAND PARK, FL 33334

**New Principal Place of Business:**

1478 NE 34TH CT  
B  
OAKLAND PARK, FL 33334

**Current Mailing Address:**

P.O. BOX 70043  
OAKLAND PARK, FL 33307

**New Mailing Address:**

P.O. BOX 24066  
OAKLAND PARK, FL 33307

**FEI Number:** 27-2214897

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SMITH, MARIA  
1522 NE 34 CT  
10  
OAKLAND PARK, FL 33334 US

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

SMITH, MARIA  
1478 NE 34TH CT  
B  
OAKLAND PARK, FL 33334 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: MARIA SMITH

05/01/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: MS.  
Name: SMITH, MARIA  
Address: 1478 NE 34TH CT #B  
City-St-Zip: OAKLAND PARK, FL 33334 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: MARIA SMITH

MS.

05/01/2011

Electronic Signature of Signing Officer or Director

Date