## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000035830

Entity Name: DISASTER RECOVERY, INC.

FILED Apr 25, 2011 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

12995 S. CLEVELAND AVE 14261 JETPORT LOOP WEST

141-170 UNIT 8

FORT MYERS, FL 33907 FORT MYERS, FL 33913

**Current Mailing Address: New Mailing Address:** 

12995 S. CLEVELAND AVE 14261 JETPORT LOOP WEST 141-170

UNIT 8

FORT MYERS, FL 33907 FORT MYERS, FL 33913

FEI Number: 61-1615749 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

MENDEZ, JAMES MENDEZ, JAMES 12995 S. CLEVELAND AVE 14261 JETPORT LOOP WEST SUITE 8 141-170

FORT MYERS, FL 33907 US FORT MYERS, FL 33913 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: 04/25/2011

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

Name: MENDEZ, JAMES A

14261 JETPORT LOOP WEST, UNIT 8 Address:

City-St-Zip: FORT MYERS, FL 33913

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: JAMES A. MENDEZ **PRES** 04/25/2011