

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000052668

**FILED**  
**Apr 26, 2012**  
**Secretary of State**

**Entity Name:** ASTRUM AND ASTRUM CORP

**Current Principal Place of Business:**

C/O SANSON KLINE JACOMINO & CO., LLP  
5805 BLUE LAGOON DRIVE, SUITE 220  
MIAMI, FL 33126

**New Principal Place of Business:**

**Current Mailing Address:**

C/O SANSON KLINE JACOMINO & CO., LLP  
5805 BLUE LAGOON DRIVE, SUITE 220  
MIAMI, FL 33126

**New Mailing Address:**

**FEI Number:** 27-3459296

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FOWLER WHITE BURNETT, P.A.  
1395 BRICKELL AVENUE  
14TH FLOOR (JFL)  
MIAMI, FL 33131 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:** DPS  
**Name:** PATRONE, ALFREDO  
**Address:** C/O 5805 BLUE LAGOON DRIVE, SUITE 220  
**City-St-Zip:** MIAMI, FL 33131 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:** ALFREDO PATRONE

DPS

04/26/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date