

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000015303

Entity Name: F.M.B. SERVICES ,INC

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

119 E MABRISA WAY  
KISSIMMEE, FL 34743

**New Principal Place of Business:**

**Current Mailing Address:**

119 E MABRISA WAY  
KISSIMMEE, FL 34743

**New Mailing Address:**

FEI Number: 27-4997947

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BERRIOS, RICHARD  
119 E MABRISA WAY  
KISSIMMEE, FL 34743 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: P  
Name: BERRIOS, FRANCISCA M  
Address: 119 E MABRISA WAY  
City-St-Zip: KISSIMMEE, FL 34743

Title: D  
Name: BERRIOS, RICHARD  
Address: 119 E MABRISA WAY  
City-St-Zip: KISSIMMEE, FL 34743

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: F.BERRIOS

P

05/01/2012

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

\_\_\_\_\_  
Date