

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000030271

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

**Entity Name:** CENTRAL PARATRANSIT SERVICES INC.

**Current Principal Place of Business:**

12115 NORTH MIAMI AVE.  
NORTH MIAMI, FL 33168 US

**New Principal Place of Business:**

**Current Mailing Address:**

12115 NORTH MIAMI AVE.  
NORTH MIAMI, FL 33168 US

**New Mailing Address:**

**FEI Number:** 45-1560275

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

EZE, RICHARD  
12115 NORTH MIAMI AVENUE  
NORTH MIAMI, FL 33168 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, D  
**Name:** EZE, RICHARD  
**Address:** 12115 NORTH MIAMI AVENUE  
**City-St-Zip:** NORTH MIAMI, FL 33168 US

**Title:** T  
**Name:** EZE, RICHARD  
**Address:** 12115 NORTH MIAMI AVENUE  
**City-St-Zip:** NORTH MIAMI, FL 33168 US

**Title:** S  
**Name:** EZE, CAROL  
**Address:** 12115 NORTH MIAMI AVENUE  
**City-St-Zip:** NORTH MIAMI, FL 33168 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:** RICHARD EZE

P,D

09/26/2012

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

\_\_\_\_\_  
Date