

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000032496

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** STRONG FRANCHISE CORP

**Current Principal Place of Business:**

1717 E. BUSCH BLVD.  
#407  
TAMPA, FL 33620

**New Principal Place of Business:**

1717 E. BUSCH BLVD.  
#200  
TAMPA, FL 33612

**Current Mailing Address:**

30439 USF HOLLY DR  
TAMPA, FL 33620

**New Mailing Address:**

1717 E. BUSCH BLVD.  
#200  
TAMPA, FL 33612

**FEI Number:** 45-1346704

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROBINSON, SHAUN C  
30439 USF HOLLY DR.  
TAMPA, FL 33620 US

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

ROBINSON, SHAUN C  
30342 USF HOLLY DR.  
TAMPA, FL 33620 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: SHAUN ROBINSON

04/30/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: ROBINSON, SHAUN C  
Address: 1717 E. BUSCH BLVD #200  
City-St-Zip: TAMPA, FL 33612

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: SHAUN ROBINSON

CEO

04/30/2012

Electronic Signature of Signing Officer or Director

Date