

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000035542

Entity Name: GOTOMYCHAT, INC.

**FILED**  
**Jan 14, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

6807 W. COMMERCIAL BLVD.  
TAMARAC, FL 33319

**New Principal Place of Business:**

**Current Mailing Address:**

6807 W. COMMERCIAL BLVD.  
TAMARAC, FL 33319

**New Mailing Address:**

FEI Number: 45-1736465

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

GREENSPOON MARDER, P.A.  
100 WEST CYPRESS CREEK ROAD  
SUITE 700  
FORT LAUDERDALE, FL 33309 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: D  
Name: LINZER, ROBERT  
Address: 6807 W. COMMERCIAL BLVD.  
City-St-Zip: TAMARAC, FL 33319

Title: D  
Name: BURKE, CHRISTOPHER  
Address: 6807 W. COMMERCIAL BLVD.  
City-St-Zip: TAMARAC, FL 33319

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: ROBERT LINZER

PRES

01/14/2012

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

\_\_\_\_\_  
Date