

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000055570

Entity Name: 3 POCKETS, INC.

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

**Current Principal Place of Business:**

7711 N MILITARY TRAIL SUITE 1002  
PALM BEACH GARDENS, FL 33410

**New Principal Place of Business:**

1201 U.S. HWY ONE  
NORTH PALM BEACH, FL 33408

**Current Mailing Address:**

7711 N MILITARY TRAIL SUITE 1002  
PALM BEACH GARDENS, FL 33410

**New Mailing Address:**

FEI Number: 45-2536488

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DALPASSO, SIMONA  
7711 N MILITARY TRAIL SUITE 1002  
PALM BEACH GARDENS, FL 33410 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: DP  
Name: TONELLI, GIORDANO  
Address: 7711 N MILITARY TRAIL SUITE 1002  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: ST  
Name: DALPASSO, SIMONA  
Address: 7711 N MILITARY TRAIL SUITE 1002  
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: GIORDANO TONELLI

DP

04/30/2012

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

\_\_\_\_\_  
Date