

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000061931

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

**Entity Name:** MEGAPLO ENTERPRISE INC

**Current Principal Place of Business:**

1455 COVE LAKE RD  
NORTH LAUDERDALE, FL 33068

**New Principal Place of Business:**

1455 COVE LAKE RD  
NORTH LAUDERDALE, FL 33068 US

**Current Mailing Address:**

P.O BOX 590035  
FORT LAUDERDALE, FL 33359

**New Mailing Address:**

P.O BOX 590035  
FORT LAUDERDALE, FL 33359 US

**FEI Number:** 45-2721652

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PLOWRIGHT, OWEN A  
9788 NW 4TH ST  
CORAL SPRINGS, FL 33071 US

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

REID'S INCOME TAX & COMPUTER SERVICE, LLC  
5419 NORTH STATE ROAD 7  
TAMARAC, FL 33319 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: WARREN REID

05/01/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: PLOWRIGHT, OWEN A  
Address: P.O BOX 590035  
City-St-Zip: FORT LAUDERDALE, FL 33359

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: OWEN A PLOWRIGHT

P

05/01/2012

Electronic Signature of Signing Officer or Director

Date