

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000063608

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Entity Name:** LUIS E BUSTAMANTE & ASSOCIATES, INC.

**Current Principal Place of Business:**

1050 E. OSCEOLA PKWY  
KISSIMMEE, FL 34744

**New Principal Place of Business:**

7901 KINGSPONTE PKWY STE 29A  
ORLANDO, FL 32819

**Current Mailing Address:**

1050 E. OSCEOLA PKWY  
KISSIMMEE, FL 34744

**New Mailing Address:**

7901 KINGSPONTE PKWY STE 29A  
ORLANDO, FL 32819

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BUSTAMATE, LUZ M  
1050 E OSCEOLA PKWY  
KISSIMMEE, FL 34744 US

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

BUSTAMATE, LUZ M  
7901 KINGSPONTE PKWY STE 29A  
ORLANDO, FL 32819 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: LUIS BUSTAMANTE

04/27/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BUSTAMANTE, LUIS E  
Address: 4575 EMERSON PARK DR, APT 208  
City-St-Zip: ORLANDO,, FL 32831

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: LUIS BUSTAMANTE

P

04/27/2012

Electronic Signature of Signing Officer or Director

Date