

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000083901

Entity Name: BLACK OPS MOTO. INC.

FILED
Mar 13, 2012
Secretary of State

Current Principal Place of Business:

251 CENTRAL PARK DRIVE
SANFORD, FL 32771 US

New Principal Place of Business:

Current Mailing Address:

251 CENTRAL PARK DRIVE
SANFORD, FL 32771 US

New Mailing Address:

FEI Number: 45-3451365

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NIKOLIC, SINISA
251 CENTRAL PARK DRIVE
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

STAJDEL, CHRISTOPHER J
251 CENTRAL PARK DRIVE
SANFORD, FL 32771 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: CHRISTOPHER STAJDEL

03/13/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: HENSON, LESLIE E
Address: 251 CENTRAL PARK DRIVE
City-St-Zip: SANFORD, FL 32771 US

Title: S
Name: STAJDEL, CHRISTOPHER J
Address: 251 CENTRAL PARK DRIVE
City-St-Zip: SANFORD, FL 32771 US

Title: VP
Name: STAJDEL, PATRICK J JR
Address: 251 CENTRAL PARK DRIVE
City-St-Zip: SANFORD, FL 32771 US

Title: T
Name: NIKOLIC, ALEKSANDAR
Address: 251 CENTRAL PARK DRIVE
City-St-Zip: SANFORD, FL 32771 US

Title: D
Name: NIKOLIC, SINISA
Address: 251 CENTRAL PARK DRIVE
City-St-Zip: SANFORD, FL 32771 US

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: CHRISTOPHER STAJDEL

S

03/13/2012

Electronic Signature of Signing Officer or Director

Date