

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000084482

**FILED**  
**Apr 03, 2012**  
**Secretary of State**

**Entity Name:** FLORIDA FEDERAL OFFICE PRODUCTS, INC.

**Current Principal Place of Business:**

5209 N. HOWARD AVENUE  
TAMPA, FL 336031419 US

**New Principal Place of Business:**

**Current Mailing Address:**

5209 N. HOWARD AVENUE  
TAMPA, FL 336031419 US

**New Mailing Address:**

**FEI Number:** 45-3477777

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LLORENTE, AURELIO JR  
5209 N. HOWARD AVENUE  
TAMPA, FL 336031419 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:** P  
**Name:** LLORENTE, AURELIO JR  
**Address:** 5209 N. HOWARD AVENUE  
**City-St-Zip:** TAMPA, FL 336031419 US

**Title:** SEC  
**Name:** LLORENTE, ALEX  
**Address:** 5209 N. HOWARD AVENUE  
**City-St-Zip:** TAMPA, FL 336031419 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:** AURELIO LLORENTE JR

PRES

04/03/2012

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

\_\_\_\_\_  
Date