

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000098839

FILED
Mar 06, 2012
Secretary of State

Entity Name: CERTIFIED STUDIOS INC.

Current Principal Place of Business:

5025 WILES RD APT 305
COCONUT CREEK, FL 33073

New Principal Place of Business:

4500 N POWERLINE RD
SUITE2
DEERFIELD BEACH, FL 33073

Current Mailing Address:

5025 WILES RD APT 305
COCONUT CREEK, FL 33073

New Mailing Address:

FEI Number: 45-3867356

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBLES, LUIS R
5025 WILES RD APT 305
COCONUT CREEK, FL 33073 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: ROBLES, LUIS R
Address: 5025 WILES RD APT 305
City-St-Zip: COCONUT CREEK, FL 33073

Title: V
Name: LLANOS, KAREN
Address: 5025 WILES RD APT 305
City-St-Zip: COCONUT CREEK, FL 33073

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 ROBLES

PRES

03/06/2012

Electronic Signature of Signing Officer or Director

Date