

## **2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P11000103091

Entity Name: AWESOME INSTINCTS INC

**FILED**  
**Jun 15, 2012**  
**Secretary of State**

### **Current Principal Place of Business:**

1650-302 #300 MARGARET ST  
JACKSONVILLE, FL 32204

### **New Principal Place of Business:**

645 PARK ST.  
# 4109  
JACKSONVILLE, FL 32204

### **Current Mailing Address:**

1650-302 #300 MARGARET ST  
JACKSONVILLE, FL 32204

### **New Mailing Address:**

645 PARK ST.  
# 4109  
JACKSONVILLE, FL 32204

FEI Number: 45-3967394

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FARHAT, ALBERT J  
1650-302 #300 MARGARET ST  
JACKSONVILLE, FL US

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

FARHAT, ALBERT J  
645 PARK ST.  
# 4109  
JACKSONVILLE, FL 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:

06/15/2012

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

### **OFFICERS AND DIRECTORS:**

Title: P  
Name: FARHAT, ALBERT J  
Address: 645 PARK ST. # 4109  
City-St-Zip: JACKSONVILLE, FL 32204

Title: VP  
Name: FARHAT, ALBERT J  
Address: 645 PARK ST. # 4109  
City-St-Zip: JACKSONVILLE, FL 32204

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: ALBERT J. FARHAT

P

06/15/2012

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

\_\_\_\_\_  
Date