

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000011301

**FILED**  
**Mar 30, 2012**  
**Secretary of State**

**Entity Name:** MUGS MANAGEMENT COMPANY

**Current Principal Place of Business:**

12400A SOUTH SHORE BLVD  
WELLINGTON, FL 33414 US

**New Principal Place of Business:**

**Current Mailing Address:**

6965 PIONEER RD  
WEST PALM BEACH, FL 33413 US

**New Mailing Address:**

**FEI Number:** 65-0463684

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COCUY, JUAN  
6965 PIONEER RD  
WEST PALM BEACH, FL 33413 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: PD  
Name: PUSATERI, DANA  
Address: 10323 EL'CABALLO CT  
City-St-Zip: DELRAY BCH, FL

Title: DTVP  
Name: COCUY, JUAN  
Address: 6965 PIONEER RD  
City-St-Zip: W P B, FL

Title: VPD  
Name: COCUY, JUAN  
Address: 6965 PIONEER ROAD  
City-St-Zip: WEST PALM BEACH, FL 33413

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: JUAN COCUY

DTVP

03/30/2012

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

\_\_\_\_\_  
Date