

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000047735

Entity Name: AMBEX, INC.

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1947 DREW ST.  
CLEARWATER, FL 33765

**New Principal Place of Business:**

**Current Mailing Address:**

1947 DREW ST.  
CLEARWATER, FL 33765

**New Mailing Address:**

FEI Number: 59-3265697

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KILGORE, SIDNEY W ESQ.  
2701 N ROCKY POINT DRIVE  
ISLAND CENTER SUITE 900  
TAMPA, FL 336075975 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: DAVIS, TERRY  
Address: 1947 DREW ST  
City-St-Zip: CLEARWATER, FL 33765

Title: VP  
Name: DAVIS, KATHLEEN K  
Address: 1947 DREW ST.  
City-St-Zip: CLEARWATER, FL 33765

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: KATHLEEN K. DAVIS

VP

04/29/2011

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

\_\_\_\_\_  
Date