# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 04, 2011**
**Secretary of State**

DOCUMENT# P94000048112

**Entity Name:** TEJOBE FLORIDA, INC.

**Current Principal Place of Business:**

355 ALHAMBRA CIRCLE
SUITE 801
CORAL GABELS, FL 33134 US

**New Principal Place of Business:**

**Current Mailing Address:**

355 ALHAMBRA CIRCLE
SUITE 801
CORAL GABELS, FL 33134 US

**New Mailing Address:**

**FEI Number: 65-6156568** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

REGISTERED AGENT CORPORATE SERVICES INC
355 ALHAMBRA CIRCLE
SUITE 801
CORAL GABLES, FL 33134 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: DPS
Name: ERASO DE RODRIGUEZ, JOSEFINA
Address: 199 OCEAN LANE DRIVE, APT. 615
City-St-Zip: KEY BISCAYNE, FL 33149 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: JOSEFINA DE RODRIGUEZ P 04/04/2011

Electronic Signature of Signing Officer or Director Date