

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000091379

Entity Name: SOMEL, INC.

**FILED**  
**Jan 09, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

4610 CENTRAL AVENUE  
ST PETERSBURG, FL 33711 US

**New Principal Place of Business:**

**Current Mailing Address:**

4610 CENTRAL AVENUE  
ST PETERSBURG, FL 33711 US

**New Mailing Address:**

FEI Number: 59-3286959

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LEMOs, CARLOS R  
4610 CENTRAL AVENUE  
ST PETERSBURG, FL 33711 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: DP  
Name: LEMOs, CARLOS R  
Address: 4610 CENTRAL AVENUE  
City-St-Zip: ST PETERSBURG, FL 33711 US

Title: DVP  
Name: LEMOs, ANNE K  
Address: 4610 CENTRAL AVENUE  
City-St-Zip: ST PETERSBURG, FL 33711 US

Title: SEC  
Name: LEMOs, ANNE K  
Address: 4610 CENTRAL AVENUE  
City-St-Zip: ST PETERSBURG, FL 33711 US

Title: TRE  
Name: LEMOs, CARLOS R  
Address: 4610 CENTRAL AVENUE  
City-St-Zip: ST PETERSBURG, FL 33711 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: CARLOS R LEMOs

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01/09/2012

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

\_\_\_\_\_  
Date