

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

DOCUMENT# P95000097130

Entity Name: ADOBE PROPERTIES, INC.

**FILED**  
**Sep 26, 2012**  
**Secretary of State**

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

% THOMAS PERRI  
665 SE WHITMORE DR  
PT ST LUCIE, FL 34983

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

ELSIE ORTEGA  
665 SE WHITMORE DR  
PT ST LUCIE, FL 34984

### **Current Mailing Address:**

% THOMAS PERRI  
665 SE WHITMORE DR  
PT ST LUCIE, FL 34983

### **New Mailing Address:**

ELSIE ORTEGA  
665 SE WHITMORE DR  
PORT ST LUCIE, FL 34984

FEI Number: 65-0629065

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PERRI, THOMAS  
665 SE WHITMORE DR  
PRT ST LUCIE, FL 34984 US

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

ORTEGA, ELSIE  
665 SE WHITMORE DR  
PORT ST LUCIE, FL 34984 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: ELSIE ORTEGA

09/26/2012

Electronic Signature of Registered Agent

Date

### **OFFICERS AND DIRECTORS:**

Title: P  
Name: LAUFENBERG, GARY  
Address: 3690 NW 87TH AVE  
City-St-Zip: COOPER CITY, FL 33024

Title: S/T  
Name: ORTEGA, ELSIE  
Address: 665 SE WHITMORE DRIVE  
City-St-Zip: PORT ST. LUCIE, FL 34984

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: ELSIE ORTEGA

S/T

09/26/2012

Electronic Signature of Signing Officer or Director

Date