

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000002346

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** FUSEMATIC CORPORATION

**Current Principal Place of Business:**

5185 SW 61 DRIVE  
PALM CITY, FL 34990 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1847  
PALM CITY, FL 34991 US

**New Mailing Address:**

**FEI Number:** 65-0631688

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

FIX, JOHN  
5185 SW 61 DRIVE  
PALM CITY, FL 34990 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: D  
Name: FIX, JOHN  
Address: POST OFFICE BOX 1847  
City-St-Zip: PALM CITY, FL 34991 US

Title: P  
Name: FIX, JOHN  
Address: P.O. BOX 1847  
City-St-Zip: PALM CITY, FL 34991 US

Title: ST  
Name: FIX, JOHN  
Address: P.O. BOX 1847  
City-St-Zip: PALM CITY, FL 34991 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: JOHN FIX

PRES

04/28/2011

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

\_\_\_\_\_  
Date