2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000005267

Entity Name: BRAVO ACCOUNTING SERVICES, INC.

Apr 27, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

650 NW 180TH TERRACE 650 NW 180TH TERRACE

SUITE 103 SUITE 103

PEMBROKE PINES, FL 33029 PEMBROKE PINES, FL 33029 UN

New Mailing Address: Current Mailing Address:

18459 PINES BLVD

#248

PEMBROKE PINES, FL 33029

FEI Number: 65-0719277 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BRAVO, ADA F 18459 PINES BLVD

#265

PEMBROKE PINES, FL 33029 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PDST

Name: BRAVO, ADA F

18459 PINES BLVD # 265 Address: City-St-Zip: PEMBROKE PINES, FL 33029

Title:

Name: BRAVO, ADRIAN E 18459 PINES BLVD # 265 Address: PEMBROKE PINES, FL 33029 City-St-Zip:

Title: D

BRAVO, AARON E Name: 18459 PINES BLVD # 265 Address: City-St-Zip: PEMBROKE PINES, FL 33029

Title:

BRAVO, CHRISTINA P Name: Address: 18459 PINES BLVD PMB 265 City-St-Zip: PEMBROKE PINES, FL 33029

Title:

BRAVO, DEMETRIO E Name: Address: 19240 NW 60TH CT City-St-Zip: MIAMI, FL 33015

Title:

Name: ARANDA, SERGIO M 18459 PINES BLVD PMB 265 Address: City-St-Zip: PEMBROKE PINES, FL 33029

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: ADA F BRAVO Ρ 04/27/2012