

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000039346

**FILED**  
**Mar 08, 2011**  
**Secretary of State**

**Entity Name:** THE PROS FROM DOVER II, INC.

**Current Principal Place of Business:**

C/O JOEL BENES  
7785 NW 146 STREET  
MIAMI LAKES, FL 33016

**New Principal Place of Business:**

**Current Mailing Address:**

C/O JOEL BENES  
7785 NW 146 STREET  
MIAMI LAKES, FL 33016

**New Mailing Address:**

**FEI Number:** 65-0871903

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BENES, EDGAR A ESQ  
2300 NW CORPORATE BOULEVARD, SUITE 222  
BOCA RATON, FL 33431 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:** P  
**Name:** WITTELS, MICHAEL  
**Address:** 1085 KANE CONCOURSE  
**City-St-Zip:** BAYHARBOR, FL 33154

**Title:** VP  
**Name:** CLIFFORD, STEVEN  
**Address:** 12996 W. DIXIE HIGHWAY  
**City-St-Zip:** N. MIAMI, FL 33161

**Title:** ST  
**Name:** BENES, JOEL  
**Address:** 21150 NE 20 AVE  
**City-St-Zip:** NMB, FL 33179

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:** JOEL BENES

S

03/08/2011

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

\_\_\_\_\_  
Date