

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000070280

**FILED**  
**Jan 23, 2012**  
**Secretary of State**

**Entity Name:** SUN CITY BARBER SHOP, INC.

**Current Principal Place of Business:**

908 N. PEBBLE BEACH BLVD.  
SUN CITY CENTER, FL 33573 US

**New Principal Place of Business:**

**Current Mailing Address:**

908 N. PEBBLE BEACH BLVD.  
SUN CITY CENTER, FL 33573 US

**New Mailing Address:**

**FEI Number:** 59-3527205

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PELLEGRENE, JAMES J  
1215 EASTLOCH COURT  
SUN CITY CENTER, FL 33573 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:** PVTs  
**Name:** QUIROZ, RANDOLPH E  
**Address:** POST OFFICE BOX 9  
**City-St-Zip:** WIMAUMA, FL 33598 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:** RANDOLPH E QUIROZ

PVTs

01/23/2012

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

\_\_\_\_\_  
Date