

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000034944

**FILED**  
**Feb 26, 2011**  
**Secretary of State**

**Entity Name:** DOIRON REFLEX REAL ESTATE, INC.

**Current Principal Place of Business:**

12930 GULF BLVD.  
MADEIRA BEACH, FL 33708

**New Principal Place of Business:**

**Current Mailing Address:**

12930 GULF BLVD.  
MADEIRA BEACH, FL 33708

**New Mailing Address:**

P.O. BOX 8927  
MADEIRA BEACH, FL 33738

**FEI Number:** 59-3569915

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DOIRON, PETER R  
12930 GULF BLVD  
MADEIRA BEACH, FL 33708 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: DOIRON, PETER R  
Address: 8139 LAUREL COURT  
City-St-Zip: SEMINOLE, FL 33776

Title: P  
Name: DOIRON, PETER R  
Address: 8139 LAUREL COURT  
City-St-Zip: SEMINOLE, FL 33776

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: PETER R. DOIRON

PRES

02/26/2011

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

\_\_\_\_\_  
Date