

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000042083

**FILED**  
**Mar 24, 2011**  
**Secretary of State**

**Entity Name:** FUSCO'S BOOKKEEPING & TAX SERVICE, INC.

**Current Principal Place of Business:**

2181 SOPCHOPPY HIGHWAY  
SOPCHOPPY, FL 32358

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 118  
SOPCHOPPY, FL 323580118

**New Mailing Address:**

PO BOX 118  
SOPCHOPPY, FL 323580118 US

**FEI Number:** 59-3572926

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FUSCO, CHRISTINA M  
60 MCKENZIE PL.  
SOPCHOPPY, FL 32358 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: PVST  
Name: FUSCO, CHRISTINA M  
Address: 2181 SOPCHOPPY HIGHWAY  
City-St-Zip: SOPCHOPPY, FL 32358

Title: D  
Name: FUSCO, CHRISTINA M  
Address: 2181 SOPCHOPPY HIGHWAY  
City-St-Zip: SOPCHOPPY, FL 32358

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: CHRISTINA M FUSCO

PRES

03/24/2011

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

\_\_\_\_\_  
Date