

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000054230

Entity Name: LAURA M. WATSON, P.A.

**FILED**  
**Mar 26, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

220 NE 51 STREET  
FORT LAUDERDALE, FL 33334

**New Principal Place of Business:**

**Current Mailing Address:**

220 NE 51 STREET  
FORT LAUDERDALE, FL 33334

**New Mailing Address:**

FEI Number: 65-0926760

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:**

WATSON, LAURA M ESQ.  
220 NE 51 STREET  
FORT LAUDERDALE, FL 33334 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: PVST  
Name: WATSON, LAURA M  
Address: 220 NE 51 ST  
City-St-Zip: FORT LAUDERDALE, FL 33334

Title: DIR  
Name: WATSON, LAURA M  
Address: 220 NE 51 ST  
City-St-Zip: FORT LAUDERDALE, FL 33334

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: LAURA M WATSON

PVST

03/26/2012

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

\_\_\_\_\_  
Date