

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000090730

Entity Name: 1011 NORTH OLIVE INC.

**FILED**  
**Jan 10, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1011 N OLIVE AVE  
WEST PALM BEACH, FL 33401

**New Principal Place of Business:**

**Current Mailing Address:**

1011 N OLIVE AVE  
WEST PALM BEACH, FL 33401

**New Mailing Address:**

FEI Number: 65-0992070

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROBERT M. W. SHALHOUB  
1011 N OLIVE AVE  
WEST PALM BEACH, FL 33401 US

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

SHALHOUB, ROBERT M  
1011 N OLIVE AVE  
WEST PALM BEACH, FL 33401 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: ROBERT M.W. SHALHOUB

01/10/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: ROBERT M. W. SHALHOUB  
Address: 8429 WEST LAKE DRIVE  
City-St-Zip: LAKE CLARKE SHORES, FL 33406

Title: P  
Name: SHALHOUB, BERNADETTE  
Address: 8429 WEST LAKE DRIVE  
City-St-Zip: LAKE CLARKE SHORES, FL 33406

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: ROBERT M.W. SHALHOUB

D

01/10/2011

Electronic Signature of Signing Officer or Director

Date