## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000097667

Entity Name: MEETING EXPECTATIONS, INC.

FILED Feb 22, 2012 Secretary of State

| Current Principal Place                                      | of Business:                    | New Principal Place of Business:   |   |  |
|--|---------------------------------|------------------------------------|---|--|
| 5396 GULF BLVD<br>#607                                       |                                 |                                    |   |  |
| ST PETE BEACH, FL 33   | 706                             |                                    |   |  |
| Current Mailing Address:                                     |                                 | New Mailing Address:               |   |  |
| 5396 GULF BLVD   |                                 |                                    |   |  |
| 607<br>ST. PETE BEACH, FL  33                                | 3706                            |                                    |   |  |
| FEI Number: 59-3606721                                       | FEI Number Applied For ( )      | FEI Number Not Applicable ( )      | Certificate of Status Desired (X)         |  |
| Name and Address of C  | urrent Registered Agent:        | Name and Address of                | Name and Address of New Registered Agent: |  |
| HASKEL, LOUIS<br>415 SO SAN REMO AVE.<br>CLEARWATER, FL 3375 |                                 |                                    |   |  |
| The above named entity s<br>in the State of Florida.         | ubmits this statement for the p | ourpose of changing its registered | d office or registered agent, or both,    |  |
| SIGNATURE:   |                                 |                                    |   |  |
| Electron   | ic Signature of Registered Age  | ent                                | <br>Date                                  |  |

## **OFFICERS AND DIRECTORS:**

Title: [

Name: LIND, LYNDA Address: 5396 GULF BLVD

City-St-Zip: ST. PETE BEACH, FL 33706

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: LYNDA LIND FONTANA MRS 02/22/2012