

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000027082

**Entity Name:** CHRISTINA MASTERS P A

**Current Principal Place of Business:**

1201 WHITE STREET  
SUITE 101  
KEY WEST, FL 33040

**Current Mailing Address:**

1201 WHITE STREET  
SUITE 101  
KEY WEST, FL 33040

**FEI Number:** 57-1158047

**Certificate of Status Desired:** No

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

MASTERS, TINA  
1201 WHITE STREET  
SUITE 101  
KEY WEST, FL 33040 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

**Officer/Director Detail :**

Title            D  
Name            MASTERS, TINA  
Address        19547 CALOOSA STREET  
City-State-Zip: SUGARLOAF FL 33042

*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:** TINA MASTERS

**DIRECTOR**

**03/20/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date