

# **2012 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P04000011295

**FILED**  
**Feb 02, 2012**  
**Secretary of State**

**Entity Name:** ADB CONSULTING & CRO INC.

**Current Principal Place of Business:**

8569 PINES BLVD SUITE 215  
PEMBROKE PINES, FL 33024

**New Principal Place of Business:**

**Current Mailing Address:**

8569 PINES BLVD SUITE 215  
PEMBROKE PINES, FL 33024

**New Mailing Address:**

**FEI Number:** 77-0645823

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BUTLER, ANDRE D  
8569 PINES BLVD, STE 215  
PEMBROKE PINES, FL 33024 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: ANDRE BUTLER

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BUTLER, ANDRE D  
Address: 8569 PINES BLVD SUITE 215  
City-St-Zip: PEMBROKE PINES, FL 33024 US

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: ANDRE BUTLER

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

P

02/02/2012

\_\_\_\_\_  
Date