

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000060285

FILED
Apr 25, 2011
Secretary of State

Entity Name: ADDICTIONS-THE CURE, INC.

Current Principal Place of Business:

4131 SOUTH UNIVERSITY BLVD
STE 11
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

4131 SOUTH UNIVERSITY BLVD
STE 11
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number: 27-0555012 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

TINA CALLAHAN, P.A., CPA
4465 BAYMEADOWS RD
STE 3
JACKSONVILLE, FL 32217 US

Name and Address of New Registered Agent:

TINA CALLAHAN, P.A., CPA
4201 BATMEADOWS RD. STE 4
STE 3
JACKSONVILLE, FL 32217 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: TINA CALLAHAN, P.A., CPA 04/25/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P
Name: POLLAK, SANFORD
Address: 4131 S UNIVERSITY BLVD STE 11
City-St-Zip: JACKSONVILLE, FL 32216

Title: VP
Name: POLLAK, CHERYL
Address: 4131 S UNIVERSITY BLVD STE 11
City-St-Zip: JACKSONVILLE, FL 32216

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: SANFORD Z. POLLAK PRES 04/25/2011

Electronic Signature of Signing Officer or Director Date