

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000082670

**FILED**  
**Apr 23, 2012**  
**Secretary of State**

**Entity Name:** R.J. DIKMAN REFERRAL ASSOCIATES, INC.

**Current Principal Place of Business:**

1315 SOUTH HOWARD AVE  
202  
TAMPA, FL 33606

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 23488  
TAMPA, FL 336233488 US

**New Mailing Address:**

**FEI Number:** 59-3469342      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

DIKMAN, ROBERT J  
1315 SOUTH HOWARD AVE  
TAMPA, FL 33606 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

**Title:** DPVS  
**Name:** DIKMAN, ROBERT J  
**Address:** 1315 SOUTH HOWARD AVE  
**City-St-Zip:** TAMPA, FL 33606

**Title:** DT  
**Name:** HARDIN, JANE L  
**Address:** 1315 SOUTH HOWARD AVE  
**City-St-Zip:** TAMPA, FL 33606

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 J DIKMAN

DPVS

04/23/2012

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

\_\_\_\_\_ Date