

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16000009140

**Entity Name:** DIFFERENT BRAINS INC.

**Current Principal Place of Business:**

3471 N. FEDERAL HWY  
# 309  
FORT LAUDERDALE, FL 33306

**Current Mailing Address:**

3471 N. FEDERAL HWY  
# 309  
FORT LAUDERDALE, FL 33306 US

**FEI Number:** 81-4697716

**Certificate of Status Desired:** No

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

REITMAN, HAROLD  
3471 N. FEDERAL HWY  
#309  
FORT LAUDERDALE, FL 33306 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 REITMAN, HAROLD S  
Address 3471 N.FEDERAL HWY #309  
City-State-Zip: FORT LAUDERDALE FL 33306

Title D  
Name KARCINELL, BERNARD  
Address 3471 N.FEDERAL HWY #309  
City-State-Zip: FORT LAUDERDALE FL 33306

Title D  
Name CANTER, FRANCIE  
Address 3471 N.FEDERAL HWY #309  
City-State-Zip: FORT LAUDERDALE FL 33306

Title D  
Name BUTTS, LORI  
Address 3471 N.FEDERAL HWY #309  
City-State-Zip: FORT LAUDERDALE FL 33306

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** HAROLD REITMAN

**DIRECTOR**

**04/05/2019**

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

\_\_\_\_\_  
Date