

2013 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P12000066219

Entity Name: THE EXPUNGEMENT CLINIC, P.A.

Current Principal Place of Business:

1875 NW CORPORATE BLVD SUITE 290
BOCA RATON, FL 33431

Current Mailing Address:

1875 NW CORPORATE BLVD SUITE 290
BOCA RATON, FL 33431

FEI Number: 46-0643338

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MERSON, MICHELLE
1875 NW CORPORATE BLVD SUITE 290
BOCA RATON, FL 33431 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 PRESIDENT
Name FRONSTIN, GUY
Address 1875 N.W. CORPORATE BLVD; SUITE
 290
City-State-Zip: BOCA RATON FL 33481

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: GUY FRONSTIN

PRESIDENT

09/23/2013

Electronic Signature of Signing Officer/Director Detail

Date