

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000037333

**Entity Name:** A EVE'S CLINIC & REFERRAL SERVICE, INC.

**Current Principal Place of Business:**

3900 NW 79TH AVENUE  
SUITE 575  
MIAMI, FL 33166

**Current Mailing Address:**

3900 NW 79TH AVENUE  
SUITE 575  
MIAMI, FL 33166

**FEI Number:** 65-0507163

**Certificate of Status Desired:** No

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

BOOKBINDER, KAREN  
3900 NW 79TH AVE  
575  
MIAMI, FL 33166 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            PRES  
Name            BOOKBINDER, KAREN  
Address        3900 NW 79TH AVE  
City-State-Zip: MIAMI FL 33166

*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:** BOOKBINDER, KAREN

**PRES**

**02/27/2014**

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

\_\_\_\_\_  
Date