2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2013
Secretary of State
CC3416286693

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Entity Name: COMPREHENSIVE CLINICAL DEVELOPMENT NW, INC.

Current Principal Place of Business:

3100 SW 145TH AVENUE
SUITE 340
MIRAMAR, FL 33027

Current Mailing Address:

3100 SW 145TH AVENUE
SUITE 340
MIRAMAR, FL 33027 US

FEI Number: 91-2113356

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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	CFO	Title	SECRETARY
Name	MORALES-PEREZ, MARGARITA	Name	MILLER, EMILY
Address	3100 SW 145TH AVENUE SUITE 340	Address	3100 SW 145TH AVENUE SUITE 340
City-State-Zip:	MIRAMAR FL 33027	City-State-Zip:	MIRAMAR FL 33027
Title	ASST. SECRETARY	Title	PRESIDENT
Name	LATEVOLA, MONICA	Name	MCGOVERN, JOHN J
Address	3100 SW 145TH AVENUE SUITE 340	Address	3100 SW 145TH AVENUE SUITE 340
City-State-Zip:	MIRAMAR FL 33027	City-State-Zip:	MIRAMAR FL 33027
Title	VP		
Name	LATEVOLA, MONICA		
Address	3100 SW 145TH AVENUE SUITE 340		
City-State-Zip:	MIRAMAR FL 33027		

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: MONICA LATEVOLA ASSISTANT SECRETARY 04/22/2013

Electronic Signature of Signing Officer/Director Detail — Date