

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 711491

**FILED**  
**Feb 07, 2012**  
**Secretary of State**

**Entity Name:** NORTH DADE CENTER, INC.

**Current Principal Place of Business:**

4481 N W 167 ST  
OPALOCKA, FL 330554311

**New Principal Place of Business:**

**Current Mailing Address:**

4481 N W 167 ST  
OPALOCKA, FL 330554311

**New Mailing Address:**

**FEI Number:** 59-1149262

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOAS, DAVID  
11440 NORTH KENDALL DR  
STE. 205  
MIAMI, FL 33176 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:** TD  
**Name:** KIALEW, JOHN  
**Address:** 5414 NW 192 LANE  
**City-St-Zip:** OPA LOCKA, FL 33055

**Title:** SD  
**Name:** DECOSTA, VIVIAN  
**Address:** 600 NE 2ND STREET  
**City-St-Zip:** DANIA, FL 33004

**Title:** PD  
**Name:** PERLMUTTER, STANLEY  
**Address:** 600 NE 2ND ST. APT. 306  
**City-St-Zip:** DANIA, FL 33004

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:** RHONDA GRAVES

D

02/07/2012

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

\_\_\_\_\_  
Date