

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000000088

Entity Name: SLEEP CARE DIAGNOSTICS, INC.

FILED
Apr 22, 2011
Secretary of State

Current Principal Place of Business:

6003 HONROE AVE STE 101
SARASOTA, FL 34238

New Principal Place of Business:

6003 HONORE AVE STE 101
SARASOTA, FL 34238

Current Mailing Address:

4780 SOCIALVILLE-FOSTERS ROAD
MASON, OH 45040

New Mailing Address:

FEI Number: 31-1138782

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALKER, GARY ESQ
202 S ROME AVENUE SUITE 100
TAMPA, FL 33606 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: DTS
Name: SNIDER, JAMES C
Address: 4780 SOCIALVILLE-FOSTER ROAD
City-St-Zip: MASON, OH 45040

Title: DP
Name: SNIDER, JASON
Address: 4780 SOCIALVILLE-FOSTER ROAD
City-St-Zip: MASON, OH 45040

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: JASON SNIDER

P

04/22/2011

Electronic Signature of Signing Officer or Director

Date