

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000003639

FILED
Apr 17, 2012
Secretary of State

Entity Name: O'BRIEN'S RESPONSE MANAGEMENT INC.

Current Principal Place of Business:

2929 E. IMPERIAL HWY
SUITE 290
BREA, CA 92821

New Principal Place of Business:

Current Mailing Address:

PO BOX 13038
FORT LAUDERDALE, FL 33316

New Mailing Address:

FEI Number: 72-0978746

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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: CEO
Name: PERKINS, K. TIM
Address: 2929 E. IMPERIAL HWY., STE 290
City-St-Zip: BREA, CA 92821 US

Title: CFO
Name: FORSTER, KEITH
Address: 2929 E. IMPERIAL HWY., STE 290
City-St-Zip: BREA, CA 92821 US

Title: EVP
Name: BRANHAM, ROBERT
Address: 2200 ELLER DRIVE, PO BOX 13038
City-St-Zip: FORT LAUDERDALE, FL 33316 US

Title: VP/T
Name: CENAC, MATTHEW
Address: 2200 ELLER DRIVE, PO BOX 13038
City-St-Zip: FORT LAUDERDALE, FL 33316 US

Title: EVP
Name: SOBIESKI, DANIEL M
Address: 2929 E. IMPERIAL HIGHWAY, SUITE 290
City-St-Zip: BREA, CA 92821 US

Title: SECR
Name: CABADA, MAYTE
Address: 2200 ELLER DRIVE, PO BOX 13038
City-St-Zip: FORT LAUDERDALE, FL 33316 US

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: MATTHEW CENAC

VP/T

04/17/2012

Electronic Signature of Signing Officer or Director

Date