

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# J88468

FILED
Oct 02, 2009
Secretary of State

Entity Name: CADD CENTERS OF FLORIDA, INC.

Current Principal Place of Business:

2005 CYPRESS CREEK RD
STE 207
FT. LAUDERDALE, FL 33309 US

New Principal Place of Business:

Current Mailing Address:

2005 CYPRESS CREEK RD
STE 207
FT. LAUDERDALE, FL 33309 US

New Mailing Address:

FEI Number: 65-0007180

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEIMAN, NANCY R
2003 CYPRESS CREEK ROAD
SUITE 207
FT LAUDERDALE, FL 33307 US

Name and Address of New Registered Agent:

ARKIN, GREGORY K
2005 CYPRESS CREEK ROAD
SUITE 207
FT LAUDERDALE, FL 33307 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: GREGORY ARKIN

10/02/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: NEIMAN, NANCY R
Address: 2005 CYPRESS CREEK RD STE 207
City-St-Zip: FT. LAUDERDALE, FL 33309

Title: P () Delete
Name: NEIMAN, RICHARD
Address: 2005 CYPRESS CREEK RD STE 207
City-St-Zip: FORT LAUDERDALE, FL 33309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: NANCY NEIMAN

P

10/02/2009

Electronic Signature of Signing Officer or Director

Date