

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J88468

**FILED**  
**Jan 23, 2012**  
**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

**Current Mailing Address:**

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

**New Principal Place of Business:**

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

**New Mailing Address:**

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

**FEI Number:** 65-0007180

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

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

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

NEIMAN, RICHARD  
2005 W. CYPRESS CREEK ROAD  
SUITE 207  
FT LAUDERDALE, FL 33309 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: RICHARD NEIMAN

01/23/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

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

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

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: RICHARD NEIMAN

PRES

01/23/2012

Electronic Signature of Signing Officer or Director

Date