## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# L08932

Entity Name: SCHAROL, INC.

FILED Jan 03, 2012 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

601 CYPRESS POINTE DR W 555 SOUTH FEDERAL HIGHWAY PEMBROKE PINES, FL 33027 US

340

BOCA RATON, FL 33432

**Current Mailing Address: New Mailing Address:** 

POST OFFICE BOX 273254 555 SOUTH FEDERAL HIGHWAY BOCA RATON, FL 334273254 US 340

BOCA RATON, FL 33432 US

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

CORR, DIANE E LEVINE, MARCIA E

601 CÝPRESS POINTE DR W 555 SOUTH FEDERAL HIGHWAY PEMBROKE PINES, FL 33027 US 340 BOCA RATON, FL 33432 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: MARCIA E LEVINE 01/03/2012

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

Name: KAPLAN, IRA D

7200 PEPPERTREE CIRCLE NORTH Address:

City-St-Zip: **DAVIE, FL 33314** 

Title: PD

Name: SCHAEFER, MARL L 60 E END AVE 21C Address: NEW YORK, NY 10028 City-St-Zip:

VPD Title:

SCHAEFER, EILEEN B Name: 2070 N OCEAN BLVD 2 Address: City-St-Zip: BOCA RATON, FL 33431

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: IRA D KAPLAN STD 01/03/2012