

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L91263

FILED
Mar 15, 2011
Secretary of State

Entity Name: SPECIALIZED NURSING SERVICES, INC.

Current Principal Place of Business:

17011 NE 6 AVE
NORTH MIAMI BEACH, FL 33162 US

New Principal Place of Business:

Current Mailing Address:

17011 NE 6 AVE
NORTH MIAMI BEACH, FL 33162 US

New Mailing Address:

FEI Number: 65-0227419 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

LOPEZ, IOVANNA
17011 NE 6 AVENUE
NORTH MIAMI BEACH, FL 33162 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: PSD
Name: LOPEZ, IOVANNA
Address: 17011 NE 6 AVE
City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

Title: VD
Name: HOPPER, ELIZABETH
Address: 17011 NE 6 AVE
City-St-Zip: NORTH MIAMI BEACH, FL 33162 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: IOVANNA LOPEZ

PRES

03/15/2011

Electronic Signature of Signing Officer or Director

Date