

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012125

FILED
Jan 26, 2012
Secretary of State

Entity Name: NO MORE TEARS, INC.

Current Principal Place of Business:

2645 EXECUTIVE PARK DRIVE, STE. 102
WESTON, FL 33331

New Principal Place of Business:

Current Mailing Address:

10097 CLEARY BLVD
#150
PLANTATION, FL 33322 US

New Mailing Address:

FEI Number: 20-5951942

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCHREIBMAN, BARBARA H ESQ.
2645 EXECUTIVE PARK DR STE 102
WESTON, FL 33331 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: PD
Name: ALI, SOMY
Address: 2645 EXECUTIVE PARK DRIVE, STE. 102
City-St-Zip: WESTON, FL 33331 US

Title: D
Name: FINLEY, LAURA
Address: 2645 EXECUTIVE PARK DRIVE, STE. 102
City-St-Zip: WESTON, FL 33331 US

Title: D
Name: RYAN, MICHAEL
Address: 2645 EXECUTIVE PARK DRIVE, STE. 102
City-St-Zip: WESTON, FL 33331 US

Title: D
Name: MOVASSAGHI, SAMAN
Address: 2645 EXECUTIVE PARK DRIVE, STE. 102
City-St-Zip: WESTON, FL 33331 US

Title: D
Name: REITER, MICHAEL
Address: 2645 EXECUTIVE PARK DRIVE, STE. 102
City-St-Zip: WESTON, FL 33331 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SOMY ALI

PRES

01/26/2012

Electronic Signature of Signing Officer or Director

Date