

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000008557

FILED
Apr 20, 2011
Secretary of State

Entity Name: MOTHER'S CRY, INC

Current Principal Place of Business:

423 SEBASTIAN SQUARE
ST. AUGUSTINE, FL 32095 US

New Principal Place of Business:

Current Mailing Address:

423 SEBASTIAN SQUARE
ST. AUGUSTINE, FL 32095 US

New Mailing Address:

FEI Number: 27-3524499

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EYYUNNI, UMA
423 SEBASTIAN SQUARE
ST AUGUSTINE, FL 32095 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: P
Name: EYYUNNI, UMA MD
Address: 423 SEBASTIAN SQUARE
City-St-Zip: ST AUGUSTINE, FL 32095 US

Title: VP
Name: KANCHA, RAVI MD
Address: 3993 REDSGAIT LANE
City-St-Zip: JACKSONVILLE, FL 32223 US

Title: S
Name: PATHAK, ANJALI A MD
Address: 5251 EMERSON ST.
City-St-Zip: JACKSONVILLE, FL 32207 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: UMA EYYUNNI

PRES

04/20/2011

Electronic Signature of Signing Officer or Director

Date