

# **2013 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N10000009503

**FILED**  
**Oct 08, 2013**  
**Secretary of State**

**Entity Name:** RECOVERY COACHING CENTER INCORPORATED

**Current Principal Place of Business:**

221 W HALLANDALE BEACH BLVD  
4  
HALLANDALE, FL 33009

**New Principal Place of Business:**

**Current Mailing Address:**

221 W HALLANDALE BEACH BLVD  
4  
HALLANDALE, FL 33009

**New Mailing Address:**

**FEI Number:** 27-3657602

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

ABDALLA, SALAH M  
2230 MONROE STREET  
6  
HOLLYWOOD, FL 33020 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:** SALAH ABDALLA

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** ABDALLA, SALAH M  
**Address:** 2230 MONROE STREET APT 6  
**City-St-Zip:** HOLLYWOOD, FL 33020

**Title:** VP  
**Name:** ANDREA, VOLFOVA  
**Address:** 221 W HALLANDALE BEACH BLVD. # 4  
**City-St-Zip:** HALLANDALE BEACH, FL 33009

**Title:** SECR  
**Name:** FEIGIN, ANNMARIE  
**Address:** 221 W HALLANDALE BEACH BLVD. # 4  
**City-St-Zip:** HALLANDALE BEACH, FL 33009

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:** SALAH ABDALLA

PRES

10/08/2013

Electronic Signature of Signing Officer or Director

Date