

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000004491

FILED  
Apr 30, 2012  
Secretary of State

**Entity Name:** CANCER CONNECTIONS, INC.

**Current Principal Place of Business:**

500 ZAMORA AVENUE  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 140248  
CORAL GABLES, FL 33114

**New Mailing Address:**

**FEI Number:** 80-0731088

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PEDRON BRANA, ANNA E  
500 ZAMORA AVENUE  
CORAL GABLES, FL 33134 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: DP  
Name: PEDRON BRANA, ANNA E  
Address: 500 ZAMORA AVENUE  
City-St-Zip: CORAL GABLES, FL 33134

Title: DVS  
Name: BRANA, JEFFREY A  
Address: 500 ZAMORA AVENUE  
City-St-Zip: CORAL GABLES, FL 33134

Title: DT  
Name: MIEDZIALKO, RICHARD  
Address: 12840 SW 43RD DRIVE #B284  
City-St-Zip: MIAMI, FL 33175

Title: DP  
Name: PEDRON BRANA, ANNA E  
Address: 500 ZAMORA AVE  
City-St-Zip: CORAL GABLES, FL 33134 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: ANNA E PEDRON BRANA

DP

04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date