

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000008414

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** ADAM D. FISCHER, P.A.

**Current Principal Place of Business:**

9045 LA FONTANA BLVD.  
221  
BOCA RATON, FL 33434

**New Principal Place of Business:**

5030 CHAMPION BLVD.  
BOCA RATON, FL 33496

**Current Mailing Address:**

9045 LA FONTANA BLVD.  
221  
BOCA RATON, FL 33434

**New Mailing Address:**

5030 CHAMPION BLVD.  
BOCA RATON, FL 33496

**FEI Number:** 65-0978156

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FISCHER, ADAM D R.A.  
9045 LA FONTANA BLVD.  
221  
BOCA RATON, FL 33434 US

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

FISCHER, ADAM D R.A.  
5030 CHAMPION BLVD.  
BOCA RATON, FL 33496 US

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

04/29/2011

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PST  
Name: FISCHER, ADAM D PRES.  
Address: 5030 CHAMPION BLVD  
City-St-Zip: BOCA RATON, FL 33496

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: ADAM D. FISCHER

PRES

04/29/2011

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

\_\_\_\_\_  
Date