

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000102646

FILED  
Jan 06, 2011  
Secretary of State

Entity Name: PHARMACONSULT INTERNATIONAL, INC.

**Current Principal Place of Business:**

1700 S. OCEAN BLVD.  
SUITE 12A  
LAUDERDALE BY THE SEA, FL 33062

**New Principal Place of Business:**

**Current Mailing Address:**

1700 S. OCEAN BLVD.  
SUITE 12A  
LAUDERDALE BY THE SEA, FL 33062

**New Mailing Address:**

FEI Number: 65-1053197

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FREEDMAN & MCCLOSKEY, P.A.  
ONE EAST BROWARD BLVD., STE. 700  
FT. LAUDERDALE, FL 33301 US

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

FREEDMAN & MCCLOSKEY, P.A.  
ONE EAST BROWARD BLVD  
STE. 700  
FT. LAUDERDALE, FL 33301 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

01/06/2011

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: COHEN, DAVID M  
Address: 1700 S. OCEAN BLVD., STE. 12A  
City-St-Zip: LAUDERDALE BY THE SEA, FL 33062

Title: DVP  
Name: COHEN, CAREN R  
Address: 1700 S. OCEAN BLVD., STE. 12A  
City-St-Zip: LAUDERDALE BY THE SEA, FL 33062

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: DAVID M. COHEN

DP

01/06/2011

Electronic Signature of Signing Officer or Director

Date