

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000115302

Entity Name: TRANSFORMATIONS, INC.

FILED  
Mar 01, 2011  
Secretary of State

## Current Principal Place of Business:

7618 SOLIMAR CIRCLE  
BOCA RATON, FL 33433

## New Principal Place of Business:

7025 BERACASA WAY  
SUITE 102G  
BOCA RATON, FL 33433

## Current Mailing Address:

7618 SOLIMAR CIRCLE  
BOCA RATON, FL 33433

## New Mailing Address:

7025 BERACASA WAY  
SUITE 102G  
BOCA RATON, FL 33433

FEI Number: 65-1074659

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROBIN, ELINOR  
7618 SOLIMAR CIRCLE  
BOCA RATON, FL 33433 US

## Name and Address of New Registered Agent:

ROBIN, ELINOR  
7025 BERACASA WAY  
SUITE 102G  
BOCA RATON, FL 33433 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:

03/01/2011

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PRES  
Name: ROBIN, ELINOR  
Address: 7025 BERACASA WAY, SUITE 102G  
City-St-Zip: BOCA RATON, FL 33433

Title: VP  
Name: SPOFFORD, DAVID J  
Address: 7025 BERACASA WAY, SUITE 102G  
City-St-Zip: BOCA RATON, FL 33433

Title: SECY  
Name: SPOFFORD, DAVID J  
Address: 7025 BERACASA WAY, SUITE 102G  
City-St-Zip: BOCA RATON, FL 33433

Title: T  
Name: ROBIN, ELINOR  
Address: 7025 BERACASA WAY, SUITE 102G  
City-St-Zip: BOCA RATON, FL 33433

Title: D  
Name: ROBIN, ELINOR  
Address: 7025 BERACASA WAY, SUITE 102G  
City-St-Zip: BOCA RATON, FL 33433

Title: D  
Name: SPOFFORD, DAVID J  
Address: 7025 BERACASA WAY, SUITE 102G  
City-St-Zip: BOCA RATON, FL 33433

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 SPOFFORD

VP

03/01/2011

Electronic Signature of Signing Officer or Director

Date