

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000034210

**FILED**  
**Apr 12, 2010**  
**Secretary of State**

**Entity Name:** SPECIAL CARE & DEVELOPMENT CORP

**Current Principal Place of Business:**

3180 N.W. 92ND STREET  
MIAMI, FL 33147 US

**New Principal Place of Business:**

340 W. 64TH STREET  
HIALEAH, FL 33012 US

**Current Mailing Address:**

3180 N.W. 92ND STREET  
MIAMI, FL 33147 US

**New Mailing Address:**

340 W. 64TH STREET  
HIALEAH, FL 33012 US

**FEI Number:** 65-1092559

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BRANA, LAZARO  
3180 N.W. 92ND STREET  
MIAMI, FL 33147 US

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

IGLESIAS, MIJAIL  
340 W. 64TH STREET  
HIALEAH, FL 33012 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:** MIJAIL IGLESIAS

04/12/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PSD  
**Name:** IGLESIAS, MIJAIL  
**Address:** 340 W. 64TH STREET  
**City-St-Zip:** HIALEAH, FL 33012

**Title:** ASST  
**Name:** PELAEZ, OFELIA  
**Address:** 340 W. 64TH STREET  
**City-St-Zip:** HIALEAH, FL 33012

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:** MIJAIL IGLESIAS

PSD

04/12/2010

Electronic Signature of Signing Officer or Director

Date