

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000042098

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** FLORIDA ACQUISITIONS MANAGER, INC.

**Current Principal Place of Business:**

1985 CEDAR BRIDGE AVE  
ATTN: LYNETTE  
LAKEWOOD, NJ 08701

**New Principal Place of Business:**

1985 CEDAR BRIDGE AVE  
ATTN: LEGAL DEPT.  
LAKEWOOD, NJ 08701

**Current Mailing Address:**

1985 CEDAR BRIDGE AVE  
ATTN: LYNETTE  
LAKEWOOD, NJ 08701

**New Mailing Address:**

1985 CEDAR BRIDGE AVE  
ATTN: LEGAL DEPT.  
LAKEWOOD, NJ 08701

**FEI Number:** 22-3796111

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NRAI SERVICES, INC.  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 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: P  
Name: LICHTENSTIEN, DAVID  
Address: 1985 CEDAR BRIDGE AVENUE  
City-St-Zip: LAKEWOOD, NJ 08701

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 LICHTENSTEIN

P

04/28/2011

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

\_\_\_\_\_ Date