

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000138783

FILED  
May 11, 2011  
Secretary of State

**Entity Name:** AVIVA HEALTHCARE STRATEGIES, INC.

**Current Principal Place of Business:**

505 S. ORANGE AVE  
# 802  
SARASOTA, FL 34236

**New Principal Place of Business:**

**Current Mailing Address:**

505 S. ORANGE AVE  
# 802  
SARASOTA, FL 34236

**New Mailing Address:**

FEI Number: 04-3798250

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BELLE, MICHAEL J  
2364 FRUITVILLE ROAD  
SARASOTA, FL 34237 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: PRE  
Name: SCHEER, AVIVA T PHD  
Address: 505 S. ORANGE AVE # 802  
City-St-Zip: SARASOTA, FL 34236

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: AVIVA SCHEER

PRES

05/11/2011

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

\_\_\_\_\_ Date