

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000019270

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

**Entity Name:** JENNIFER LEVIN, P.A.

**Current Principal Place of Business:**

19380 COLLINS AVE  
SUITE 1120  
SUNNY ISLES BEACH, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

19380 COLLINS AVE  
SUITE 1120  
SUNNY ISLES BEACH, FL 33160

**New Mailing Address:**

**FEI Number:** 35-2246976      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

LEVIN, JENNIFER  
19380 COLLINS AVE  
SUITE 1120  
SUNNY ISLES BEACH, FL 33160 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: PTSD  
Name: LEVIN, JENNIFER  
Address: 19380 COLLINS AVE SUITE 1120  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

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: JENNIFER LEVIN

PRES

04/28/2011

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

\_\_\_\_\_ Date