

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000063549

**FILED**  
**May 01, 2007**  
**Secretary of State**

**Entity Name:** SENSICARE OF SOUTH FLORIDA, INC.

**Current Principal Place of Business:**

17027 W DIXIE HWY STE 118  
N MIAMI BEACH, FL 33160

**New Principal Place of Business:**

17027 W DIXIE HWY STE 105  
N MIAMI BEACH, FL 33160

**Current Mailing Address:**

17027 W DIXIE HWY STE 118  
N MIAMI BEACH, FL 33160

**New Mailing Address:**

17027 W DIXIE HWY STE 105  
N MIAMI BEACH, FL 33160

**FEI Number:** 38-3738750

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KATZ, NAOMI  
17027 W DIXIE HWY STE 118  
N MIAMI BEACH, FL 33160 US

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

KATZ, NAOMI  
17027 W DIXIE HWY STE 105  
N MIAMI BEACH, FL 33160 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: \_\_\_\_\_

05/01/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: KATZ, NAOMI  
Address: 410 E HALLANDALE BEACH BLVD, STE 205  
City-St-Zip: HALLANDALE, FL 33009

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D/T (X) Change ( ) Addition  
Name: KATZ, NAOMI  
Address: 17027 W DIXIE HWY STE 105  
City-St-Zip: N MIAMI BEACH, FL 33160

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: NAOMI KATZ

PRES

05/01/2007

Electronic Signature of Signing Officer or Director

Date