2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000081911

Entity Name: XENACARE HOLDINGS, INC.

FILED Mar 16, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6001 BROKEN SOUND PARKWAY 950 PENINSULA CORP CIRCLE

STE 630 STE 3017

BOCA RATON, FL 33487 BOCA RATON, FL 33487

Current Mailing Address: New Mailing Address:

6001 BROKEN SOUND PARKWAY 950 PENINSULA CORP CIRCLE

STE 630 STE 3017 BOCA RATON, FL 33487 BOCA RA

BOCA RATON, FL 33487

FEI Number: 20-3075747 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

RIZZO, FRANK W
6001 BROKEN SOUND PARKWAY
STE 630
STE 3017
RIZZO, FRANK W
950 PENINSULA CORP CIRCLE
STE 3017

BOCA RATON, FL 33487 US BOCA RATON, FL 33487 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: 03/16/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: [

Name: XENAKIS, ALAN P

Address: 950 PENINSULA CORP CIRCLE, STE 3017

City-St-Zip: BOCA RATON, FL 33487

Title: DP

Name: RIZZO, FRANK W

Address: 950 PENINSULA CORP CIRCLE, STE 3017

City-St-Zip: BOCA RATON, FL 33487

Title: DS

Name: STORY, BOBBY

Address: 950 PENINSULA CORP CIRCLE, STE 3017

City-St-Zip: BOCA RATON, FL 33487

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: FRANK W RIZZO DP 03/16/2012