

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000052103

Entity Name: ACCU-BREAK TECHNOLOGIES, INC.

FILED  
Jan 06, 2012  
Secretary of State

**Current Principal Place of Business:**

1000 SOUTH PINE ISLAND ROAD  
SUITE 430  
PLANTATION, FL 33324

**New Principal Place of Business:**

1000 SOUTH PINE ISLAND ROAD  
SUITE 430  
PLANTATION, FL 33324

**Current Mailing Address:**

**New Mailing Address:**

FEI Number: 20-5876662      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GOLDFARB, ROBERT I  
1000 SOUTH PINE ISLAND ROAD  
SUITE 430  
PLANTATION, FL 33324 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: D CH  
Name: HAHN, ELLIOT F PH.D.  
Address: 1000 S. PINE ISLAND ROAD, SUITE 430  
City-St-Zip: PLANTATION, FL 33324

Title: P  
Name: GOLDFARB, ROBERT I  
Address: 1000 S. PINE ISLAND ROAD, SUITE 430  
City-St-Zip: PLANTATION, FL 33324

Title: D VP  
Name: LUCKING, DAVID  
Address: 1000 S. PINE ISLAND ROAD, SUITE430  
City-St-Zip: PLANTATION, FL 33324

Title: VP  
Name: GREEN, GEOFF  
Address: 1000 S. PINE ISLAND ROAD, SUITE430  
City-St-Zip: PLANTATION, FL 33324

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: ROBERT I. GOLDFARB

PRES

01/06/2012

Electronic Signature of Signing Officer or Director

Date