2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2012
Secretary of State

DOCUMENT# P07000038911

Entity Name: KANE CLINIC, INC.

Current Principal Place of Business:

115 E 67 ST
2D
NEW YORK, NY 10065

New Principal Place of Business:

1 JOHN ANDERSON DR.
617
ORMOND BEACH, FL 32176

Current Mailing Address:

115 E 67 ST
2D
NEW YORK, NY 10065

New Mailing Address:

FEI Number: 20-8723522 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KANE, MICHAEL
1 JOHN ANDERSON DR.
617
ORMOND BEACH, FL 32176 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: P
Name: KANE, MICHAEL
Address: 1 JOHN ANDERSON DR. #617
City-St-Zip: ORMOND BEACH, FL 32176

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: MICHAEL KANE P 02/09/2012

Electronic Signature of Signing Officer or Director — Date