

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000074231

FILED
Mar 16, 2012
Secretary of State

Entity Name: GPL LEGAL NURSE CONSULTANTS & ASSOCIATES, INC.

Current Principal Place of Business:

700 N.W. 76TH AVE
700 N.W. 76TH AVENUE
PEMBROKE PINES, FL 33024 IN

New Principal Place of Business:

Current Mailing Address:

700 N.W. 76TH AVE
700 N.W. 76TH AVENUE
PEMBROKE PINES, FL 33024 IN

New Mailing Address:

FEI Number: 75-3243862

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOUST, BARBARA
3401 NW 202ND STREET
700 N.W. 76TH AVENUE
MIAMI GARDENS, FL 330561722 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: LOUISSANT, GALDYS
Address: 700 N.W. 76TH AVE
City-St-Zip: PEMBROKE PINES, FL 33024 IN

Title: VP
Name: LOUISSANT, KESNER VP
Address: 700 N.W. 76TH AVE
City-St-Zip: PEMBROKE PINES, FL 33024 IN

Title: VP
Name: LOUISSANT, KESNER VP
Address: 700 N.W. 76TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33024 IN

Title: VP
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Title: VP
Name: LOUISSANT, KESNER VP
Address: 700 N.W. 76TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33024 IN

Title: VP
Name: LOUISSANT, KESNER VP
Address: 700 N.W. 76TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33024 IN

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: KESNER, LOUISSANT

VP

03/16/2012

Electronic Signature of Signing Officer or Director

Date