

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000106827

FILED
Jan 16, 2009
Secretary of State

Entity Name: RECOVERY SOLUTIONS OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

300 SW 4TH COURT
FT. LAUDERDALE, FL 33315

New Principal Place of Business:

Current Mailing Address:

6278 N. FEDERAL HWY.
PMB 392
FT. LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 26-1170888

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CROCCO, JULIE
1975 E SUNRISE BLVD., STE. 100
FT. LAUDERDALE, FL 33304 US

Name and Address of New Registered Agent:

CROCCO, JULIE
3021 NE 42ND STREET
FT. LAUDERDALE, FL 33308 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:

01/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: CROCCO, JULIE
Address: 3021 NW 42ND STREET
City-St-Zip: FT. LAUDERDALE, FL 33084

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: CROCCO, JULIE
Address: 3021 NW 42ND STREET
City-St-Zip: FT. LAUDERDALE, FL 33308

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: JULIE CROCCO

CEO

01/16/2009

Electronic Signature of Signing Officer or Director

Date