## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000115365

Entity Name: SERVICECARE BY BRISSON, INC.

FILED May 11, 2009 Secretary of State

Elitity Nu	MC. GERVICECARE BY BRIGGON, IN	0.		
Current P	rincipal Place of Business:	New Principal Place	of Business:	
1458 SW 2 DEERFIEL	28TH AVE LD BEACH, FL 33442			
Current Mailing Address:		New Mailing Address	New Mailing Address:	
1458 SW 2 DEERFIEL	28TH AVE LD BEACH, FL 33442			
FEI Number	: 75-3262112 FEI Number Applied For (	( ) FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:		nt: Name and Address o	Name and Address of New Registered Agent:	
DEERFIEL The above	DIANE 28TH. AVE. D BEACH, FL 33442 US named entity submits this statement for e of Florida.	or the purpose of changing its registere	d office or registered agent, or both,	
SIGNATUI	RE:			
	Electronic Signature of Registere	ed Agent	Date	
Election Ca	mpaign Financing Trust Fund Contribution (	).		
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PS () Delete BRISSON, GEORGE 1458 SW 28TH AVE DEERFIELD BEACH, FL 33442	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VT () Delete BRISSON, DIANE 1458 SW 28TH AVE DEERFIELD BEACH, FL 33442	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: GEORGE R. BRISSON OWNE 05/11/2009

To Annual Report Division Dept. of State Tallahassee, Fla. 32314 May 5, 2009

Dear Sir,

Regarding our annual Report

I did not receive notification in the mail regarding this payment and this is the first full year we have been incorporated. I went ahead and paid the 400.00 late fee. My accountant advised me to notify you since I did not receive any notice either by mail or email regarding this. It would be GREATLY appreciated if you could give me a one time waiver on this..Thank you very much. Our tax I.D. # 75-3262112 Servicecare by Brisson. You may either refund to ServiceCare by Brisson or George R. Brisson.

Sincerely,

George R. Brisson