

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000009352

Entity Name: DCA LABORATORY, INC.

**FILED**  
**Apr 01, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

200 LESLIE DRIVE #1014  
HALLANDALE BEACH, FL 33009

**New Principal Place of Business:**

**Current Mailing Address:**

200 LESLIE DRIVE #1014  
HALLANDALE BEACH, FL 33009

**New Mailing Address:**

FEI Number: 26-1871774

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

REZNIK, KATE  
200 LESLIE DRIVE #1014  
HALLANDALE BEACH, FL 33009 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: PRES  
Name: REZNIK, KATE  
Address: 200 LESLIE DRIVE 1014  
City-St-Zip: HALLANDALE, FL 33009

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: KATE REZNIK

PR

04/01/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date