2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000021213

Entity Name: PALM SPRINGS RESEARCH INSTITUTE, INC.

FILED Jan 29, 2011 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

1490 W. 49TH PL., SUITE 205-208 SUITE 205-208 HIALEAH. FL 33012

Current Mailing Address: New Mailing Address:

1490 W. 49TH PL., SUITE 205-208 SUITE 205-208 HIALEAH, FL 33012

FEI Number: 26-2051213 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PEREZ, MARIA V 1490 W. 49TH PL., SUITE 205-208 HIALEAH, FL 33012 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

Name: SUAREZ, LIANNE MBA

Address: 1490 W. 49TH PL., SUITE 205-208

City-St-Zip: HIALEAH, FL 33012

Title: VP

Name: PEREZ, MARIA V RMA

Address: 1490 W. 49TH PL., SUITE 205-208

City-St-Zip: HIALEAH, FL 33012

Title: D

Name: CANETE, LUIS RMA

Address: 1490 W. 49TH PL., SUITE 205-208

City-St-Zip: HIALEAH, FL 33012

Title: D

Name: SUAREZ, VICTOR RMA

Address: 1490 W. 49TH PL., SUITE 205-208

City-St-Zip: HIALEAH, FL 33012

Title: [

Name: MARQUEZ, FARID MD

Address: 1490 W. 49TH PL., SUITE 205-208

City-St-Zip: HIALEAH, FL 33012

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: MARIA V. PEREZ VP 01/29/2011