

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P08000033684

FILED
May 21, 2009
Secretary of State**Entity Name:** CLINICAL RESEARCH APPROACH CORPORATION**Current Principal Place of Business:**6645 SW 55 LN
MIAMI, FL 33155**New Principal Place of Business:**8620 SW 84 TERR
MIAMI, FL 33143**Current Mailing Address:**6645 SW 55 LN
MIAMI, FL 33155**New Mailing Address:**8620 SW 84 TERR
MIAMI, FL 33143**FEI Number:** 26-2310427**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 US**Name and Address of New Registered Agent:**ARRUBLA, JULIE A RN
8620 SW 84 TERR
MIAMI, FL 33143 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: JULIE A. ARRUBLA

05/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** D () Delete
Name: ARRUBLA, JULIE A
Address: 6645 SW 55 LN
City-St-Zip: MIAMI, FL 33155**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** D (X) Change () Addition
Name: ARRUBLA, JULIE A
Address: 8620 SW 84 TERR
City-St-Zip: MIAMI, FL 33143

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 A ARRUBLA

RN

05/21/2009

Electronic Signature of Signing Officer or Director

Date