

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000051959

FILED
Jun 15, 2012
Secretary of State

Entity Name: OPEN ARMS COMMUNITY MENTAL HEALTH CENTER, INC.

Current Principal Place of Business:

10645 NW 7 AVE
SUITE 103 & 104
MIAMI, FL 33150

New Principal Place of Business:

Current Mailing Address:

10645 NW 7 AVE
SUITE 103 & 104
MIAMI, FL 33150

New Mailing Address:

FEI Number: 27-0387156

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CHER-FRERE, NEHEMY
5068 SW 139TH AVENUE
MIRAMAR, FL 33027 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: PCEO
Name: CHER-FRERE, NEHEMY
Address: 5068 SW 139TH AVENUE
City-St-Zip: MIRAMAR, FL 33027

Title: VP
Name: MOREAU, PIERRE
Address: 16285 SW 18 ST
City-St-Zip: MIRAMAR, FL 33027

Title: SCFO
Name: FRANCOIS, FREUD
Address: 3601 NE 170 ST #405
City-St-Zip: N MIAMI BEACH, FL 33160

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: NEHEMY CHER-FRERE

PCEO

06/15/2012

Electronic Signature of Signing Officer or Director

Date