

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000074330

FILED
Apr 29, 2011
Secretary of State

Entity Name: NEUROSCIENCE ASSOCIATES OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

5420 HAMMOCK DRIVE
CORAL GABLES, FL 33156

New Principal Place of Business:

Current Mailing Address:

5420 HAMMOCK DRIVE
CORAL GABLES, FL 33156

New Mailing Address:

FEI Number: 27-0869674

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVIN, BONNIE
5420 HAMMOCK DRIVE
CORAL GABLES, FL 33156 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: P
Name: LEVIN, BONNIE
Address: 5420 HAMMOCK DRIVE
City-St-Zip: CORAL GABLES, FL 33156

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: BONNIE LEVIN

P

04/29/2011

Electronic Signature of Signing Officer or Director

Date