

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000079358

**FILED**  
**Mar 30, 2011**  
**Secretary of State**

**Entity Name:** FLORIDA DETOX CENTERS INC.

**Current Principal Place of Business:**

6076 OKEECHOBEE BOULEVARD  
SUITE 53-54  
WEST PALM BCH, FL 33417

**New Principal Place of Business:**

**Current Mailing Address:**

784 NE 70 STREET  
MIAMI, FL 33138

**New Mailing Address:**

6076 OKEECHOBEE BOULEVARD  
SUITE 53-54  
WEST PALM BCH, FL 33417

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROCHA, JOSE R  
784 NE 70 STREET  
MIAMI, FL 33138 US

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

ROCHA, JOSE R  
1133 FAIRLAKE TRACE  
APT. 2002  
WESTON, FL 33326 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: JOSE ROCHA

03/30/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PVST  
Name: ROCHA, JOSE R  
Address: 784 NE 70 STREET  
City-St-Zip: MIAMI, FL 33138

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: JOSE ROCHA

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03/30/2011

Electronic Signature of Signing Officer or Director

Date