

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000025901

FILED
Feb 22, 2011
Secretary of State

Entity Name: LEGAL NURSE CONSULTING CENTER, INC.

Current Principal Place of Business:

1500 S. OCEAN DRIVE
SUITE 15 J
HOLLYWOOD BEACH, FL 33019

New Principal Place of Business:

Current Mailing Address:

1500 S. OCEAN DRIVE
SUITE 15 J
HOLLYWOOD BEACH, FL 33019

New Mailing Address:

FEI Number: 20-4387732

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKAVRONECK, ANDREW
1500 S. OCEAN DRIVE
SUITE 15 J
HOLLYWOOD BEACH, FL 33019 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: D
Name: SKAVRONECK, DREW
Address: 1500 S. OCEAN DRIVE
City-St-Zip: HOLLYWOOD BEACH, FL 33019

Title: T
Name: GUTERRES, MILLIE
Address: 1500 S. OCEAN DRIVE
City-St-Zip: HOLLYWOOD BEACH, FL 33019

Title: S
Name: FIERROZ, ESTELLA
Address: 1500 S. OCEAN DRIVE
City-St-Zip: HOLLYWOOD BEACH, FL 33019

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: DREW SKAVRONECK

DIRE

02/22/2011

Electronic Signature of Signing Officer or Director

Date