

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000027815

**FILED**  
**Jan 13, 2012**  
**Secretary of State**

**Entity Name:** RITA ALTMAN, P.A.

**Current Principal Place of Business:**

105 SOUTH NARCISSUS AVENUE  
SUITE 503  
WEST PALM BEACH, FL 33401

**New Principal Place of Business:**

215 S OLIVE AVENUE  
SUITE 200  
WEST PALM BEACH, FL 33401

**Current Mailing Address:**

105 SOUTH NARCISSUS AVENUE  
SUITE 503  
WEST PALM BEACH, FL 33401

**New Mailing Address:**

215 S OLIVE AVENUE  
SUITE 200  
WEST PALM BEACH, FL 33401

**FEI Number:** 65-0348688

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ALTMAN, RITA  
105 SOUTH NARCISSUS AVENUE  
SUITE 503  
WEST PALM BEACH, FL 33401 US

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

ALTMAN, RITA  
215 S OLIVE AVENUE  
SUITE 200  
WEST PALM BEACH, FL 33401 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: RITA ALTMAN

01/13/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: ALTMAN, RITA  
Address: 215 S OLIVE AVENUE, STE 200  
City-St-Zip: WEST PALM BEACH, FL 33401

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: RITA ALTMAN

D

01/13/2012

Electronic Signature of Signing Officer or Director

Date