

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000028863

**FILED**  
**Jul 07, 2011**  
**Secretary of State**

**Entity Name:** AMERICAN CORPORATE TURNAROUND, INC.

**Current Principal Place of Business:**

6820 LYONS TECHNOLOGY PARKWAY  
COCONUT CREEK, FL 33073

**New Principal Place of Business:**

6820 LYONS TECHNOLOGY PARKWAY  
225  
COCONUT CREEK, FL 33073

**Current Mailing Address:**

6820 LYONS TECHNOLOGY PARKWAY  
COCONUT CREEK, FL 33073

**New Mailing Address:**

6820 LYONS TECHNOLOGY PARKWAY  
225  
COCONUT CREEK, FL 33073

**FEI Number:** 27-1159672

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

POST, SHARI  
6820 LYONS TECHNOLOGY PARKWAY  
COCONUT CREEK, FL 33073 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: PS  
Name: POST, SHARI  
Address: 6820 LYONS TECHNOLOGY PARKWAY #225  
City-St-Zip: COCONUT CREEK, FL 33073

Title: CFO  
Name: POST, SHARI  
Address: 6820 LYONS TECHNOLOGY PARKWAY #225  
City-St-Zip: COCONUT CREEK, FL 33073

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: SHARI POST

PRES

07/07/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date