

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000039353

FILED
Feb 11, 2011
Secretary of State

Entity Name: SOUTHEASTERN CLINICAL SPECIALTIES INC.

Current Principal Place of Business:

2303 HOLLYWOOD BOULEVARD
SUITE 12
HOLLYWOOD, FL 33020

New Principal Place of Business:

2801 NE 10TH AVENUE
WILTON MANORS, FL 33334

Current Mailing Address:

2801 NE 10TH AVENUE
WILTON MANORS, FL 33334

New Mailing Address:

FEI Number: 27-2523542

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MICHAEL, MAXINE A MS.
2801 NE 10TH AVENUE
WILTON MANORS, FL 33334 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: MICHAEL, MAXINE A
Address: 2801 NE 10 AVENUE
City-St-Zip: WILTON MANORS, FL 33334

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: MAXINE A MICHAEL

PRES

02/11/2011

Electronic Signature of Signing Officer or Director

Date