

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000080690

FILED
Apr 30, 2011
Secretary of State

Entity Name: NEW FRIENDSHIPS RECOVERY CENTERS. INC

Current Principal Place of Business:

1881 NE 26TH STREET
SUITE 70
FORT LAUDERDALE, FL 33305

New Principal Place of Business:

Current Mailing Address:

1881 NE 26TH STREET
SUITE 70
FORT LAUDERDALE, FL 33305

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PECORARO, CARMINE J JR
1881 NE 26TH STREET
SUITE 70
FORT LAUDERDALE, FL 33305 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: PECORARO, JUDITH A
Address: 1881 NE 26TH STREET SUITE 70
City-St-Zip: FORT LAUDERDALE, FL 33305

Title: VP
Name: WALKER, MARY
Address: 1881 NE 26TH STREET SUITE 70
City-St-Zip: FORT LAUDERDALE, FL 33305

Title: TR
Name: PECORARO, CARMINE J
Address: 1881 NE 26TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33305

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: JUDITH PECORARO

P

04/30/2011

Electronic Signature of Signing Officer or Director

Date