

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000044832

**FILED**  
**Mar 27, 2012**  
**Secretary of State**

**Entity Name:** HOWARD M. COHEN M.S., P.A

**Current Principal Place of Business:**

220 NW 35TH COURT  
OAKLAND PARK, FL 33309

**New Principal Place of Business:**

2312 WILTON DRIVE  
WILTON MANORS, FL 33305

**Current Mailing Address:**

220 NW 35TH COURT  
OAKLAND PARK, FL 33309

**New Mailing Address:**

**FEI Number:** 45-2160248

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COHEN, HOWARD M  
220 NW 35TH COURT  
OAKLAND PARK, FL 33309 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: MR  
Name: COHEN, HOWARD M  
Address: 220 NW 35TH COURT  
City-St-Zip: OAKLAND PARK, FL 33309 US

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: HOWARD M COHEN

MR

03/27/2012

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

\_\_\_\_\_  
Date