

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000085670

FILED
Feb 27, 2012
Secretary of State

Entity Name: SOCIAL SERVICES CENTER OF FLORIDA CITY, INC.

Current Principal Place of Business:

995 N. MIAMI BEACH BLVD.
SUITE 100
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

751 WEST PALM DRIVE
FLORIDA CITY, FL 33034

Current Mailing Address:

995 N. MIAMI BEACH BLVD.
SUITE 100
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

FEI Number: 45-3505288

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FELUREN, MARK S ESQ.
200 EAST BROWARD BLVD.
SUITE 1110
FORT LAUDERDALE, FL 33301 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: D,P
Name: CARRALERO, RITA
Address: 995 N. MIAMI BEACH BLVD., SUITE 100
City-St-Zip: NORTH MIAMI BEACH, FL 33162

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 CARRALERO

P

02/27/2012

Electronic Signature of Signing Officer or Director

Date