

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000088781

FILED
Apr 19, 2012
Secretary of State

Entity Name: SLEEP DISORDER RESEARCH CENTER, INC

Current Principal Place of Business:

145 MADEIRA AVENUE
SUITE 209
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

145 MADEIRA AVENUE
SUITE 209
CORAL GABLES, FL 33134

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:

REYES, AMADOR JR
18025 SW 83RD COURT
PALMETTO BAY, FL 33157 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: REYES, AMADOR JR
Address: 18025 SW 83RD COURT
City-St-Zip: PALMETTO BAY, FL 33157

Title: SEC
Name: REYES, AMADOR JR
Address: 18025 SW 83RD COURT
City-St-Zip: PALMETTO BAY, FL 33157

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: AMADOR REYES JR

PRES

04/19/2012

Electronic Signature of Signing Officer or Director

Date