

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000072312

**FILED**  
**Jun 13, 2012**  
**Secretary of State**

**Entity Name:** THE SCHIFFMAN LAW GROUP, P.A.

**Current Principal Place of Business:**

2875 N.E. 191ST STREET, STE. 404  
AVENTURA, FL 33180 US

**New Principal Place of Business:**

**Current Mailing Address:**

2875 N.E. 191ST STREET, STE. 404  
AVENTURA, FL 33180 US

**New Mailing Address:**

**FEI Number:** 65-0521732

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCHIFFMAN, ADAM R  
2750 NE 185TH STREET  
SECOND FLOOR  
AVENTURA, FL 33180 US

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

SCHIFFMAN, ADAM R  
2875 NE 191ST STREET  
SUITE #404  
AVENTURA, FL 33180 US

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

06/13/2012

Date

**OFFICERS AND DIRECTORS:**

Title: DPST  
Name: SCHIFFMAN, ADAM R.  
Address: 2750 NE 185TH STREET 2ND FLOOR  
City-St-Zip: AVENTURA, FL 33180

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: ADAM R. SCHIFFMAN

DPST

06/13/2012

Electronic Signature of Signing Officer or Director

Date