

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000018741

FILED
Apr 05, 2011
Secretary of State

Entity Name: WHITE CRANE HEALING ARTS CENTER, INC.

Current Principal Place of Business:

7071 W COMMERCIAL BLVD
2-C
FORT LAUDERDALE, FL 33319 US

New Principal Place of Business:

Current Mailing Address:

7071 W COMMERCIAL BLVD
2-C
FORT LAUDERDALE, FL 33319 US

New Mailing Address:

FEI Number: 65-0560277 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

IBORRA, FRANK
11470 NW 38 PL
SUNRISE, FL 333231104 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: PD
Name: IBORRA, FRANK
Address: 11470 NW 38 PL
City-St-Zip: SUNRISE, FL 3323-104

Title: VD
Name: IBORRA, MARION
Address: 11470 NW 38 PL
City-St-Zip: SUNRISE, FL 333231104

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: FRANK IBORRA

PRES

04/05/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date