

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000062097

Entity Name: SURROGATE PLUS, INC.

**FILED**  
**Feb 21, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

5737 OKEECHOBEE BLVD  
200  
WEST PALM BEACH, FL 33417 US

**New Principal Place of Business:**

**Current Mailing Address:**

2825 FARRAGUT LANE  
WEST PALM BEACH, FL 33409 US

**New Mailing Address:**

FEI Number: 65-0770569

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GASSMAN, JAYNE D PH.D.  
2825 FARRAGUT LANE  
WEST PALM BEACH, FL 33409 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: DR  
Name: GASSMAN, JAYNE D PHD  
Address: 2825 FARRAGUT LANE  
City-St-Zip: WEST PALM BEACH, FL 33409

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: JAYNE D. GASSMAN

DR.

02/21/2012

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

\_\_\_\_\_  
Date