2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000029897

City-St-Zip:

Title: Name:

Address: City-St-Zip: BOCA RATON, FL 33486

BOCA RATON, FL 33486

ALBOUKREK, DAVID 1050 NW 15TH STREET

Entity Name: RASF CLINICAL RESEARCH, INC.

FILED Jan 24, 2011 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
	15TH STREET			
208A BOCA RA ⁻	TON, FL 33486	3		
Current Mailing Address:			New Mailing Address:	
	15TH STREET			
208A BOCA RA ⁻	TON, FL 33486	3		
FEI Number:	: 65-0920331	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:	
	ANNETTE RTHWEST 46T PRINGS, FL 33			
	named entity s e of Florida.	ubmits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,
SIGNATUR	RE:			
	Electroni	c Signature of Registered Age	ent	Date
OFFICERS	S AND DIRECT	ORS:		
Title: Name: Address: City-St-Zip:	D PARDO, IRA 1050 NW 15TH BOCA RATON, F			
Title: Name: Address: City-St-Zip:	V FORSTOT, JOS 1050 NW 15TH BOCA RATON, F	STREET		
Title: Name: Address:	T BACA, SHAWN 1050 NW 15TH	STREET		

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: SHAWN BACA T 01/24/2011