

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000078446

Entity Name: NEIL B. SCHARF D.C., P.A.

**FILED**  
**Jan 06, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

5953 W HILLSBORO BLVD  
PARKLAND, FL 33067

**New Principal Place of Business:**

**Current Mailing Address:**

5953 W HILLSBORO BLVD  
PARKLAND, FL 33067

**New Mailing Address:**

FEI Number: 65-0946856

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPIEGEL & UTRERA, P.A.  
343 ALMERIA AVENUE  
CORAL GABLES, FL 33134 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: PSTD  
Name: SCHARF, NEIL B  
Address: 5953 W HILLSBORO BLVD  
City-St-Zip: PARKLAND, FL 33067

Title: S  
Name: SCHARF, PATRICIA P  
Address: 5953 W HILLSBORO BLVD  
City-St-Zip: PARKLAND, FL 33067

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: NEIL B. SCHARF

D.C.

01/06/2012

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

\_\_\_\_\_  
Date