2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012125

Entity Name: NO MORE TEARS, INC.

Current Principal Place of Business:

2645 EXECUTIVE PARK DRIVE, STE. 102 WESTON, FL 33331

Current Mailing Address:

10097 CLEARY BLVD #150 PLANTATION, FL 33322 US

FEI Number: 20-5951942

Name and Address of Current Registered Agent:

SCHREIBMAN, BARBARA HESQ. 2645 EXECUTIVE PARK DR STE 102 WESTON, FL 33331 US Certificate of Status Desired: No

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

Officer/Director Detail :

ctor Detail :		
PD	Title	D
ALI, SOMY	Name	FINLEY, LAURA
2645 EXECUTIVE PARK DRIVE, STE. 102	Address	2645 EXECUTIVE PARK DRIVE, STE. 102
WESTON FL 33331	City-State-Zip:	WESTON FL 33331
D	Title	D
RYAN, MICHAEL	Name	AMIN, VANDAN
2645 EXECUTIVE PARK DRIVE, STE. 102	Address	2645 EXECUTIVE PARK DRIVE, STE. 102
WESTON FL 33331	City-State-Zip:	WESTON FL 33331
D		
BROWN, SHANNON		
2645 EXECUTIVE PARK DRIVE, STE.		
102		
	PD ALI, SOMY 2645 EXECUTIVE PARK DRIVE, STE. 102 WESTON FL 33331 D RYAN, MICHAEL 2645 EXECUTIVE PARK DRIVE, STE. 102 WESTON FL 33331 D BROWN, SHANNON	PDTitleALI, SOMYName2645 EXECUTIVE PARK DRIVE, STE.Address102WESTON FL 33331City-State-Zip:DTitleRYAN, MICHAELName2645 EXECUTIVE PARK DRIVE, STE.Address102City-State-Zip:DState-Zip:State-Zip:State-Zip:DState-Zip:State-Zip:State-Zip:State-Zip:State-Zip:State-Zip:State-Zip:State-Zip:State-Zip:State-Zip:State-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SOMY ALI	PD	01/25/2013

Electronic Signature of Signing Officer/Director Detail

Date

Date