

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000042708

Entity Name: HOMESTEAD CLINICAL RESEARCH, INC

Current Principal Place of Business:

311 NE 8TH ST
110
HOMESTEAD, FL 33030

Current Mailing Address:

100 NE 6TH AVE
#809
HOMESTEAD, FL 33030

FEI Number: 45-5562342

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOPEZ, YOELVYS SR
100 NE 6TH AVE
809
HOMESTEAD, FL 33030 US

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

Officer/Director Detail :

Title	P	Title	VP
Name	LOPEZ, YOELVYS SR	Name	ALONSO, NEREISY
Address	100 NE 6TH AVE	Address	100 NE 6TH AVE
City-State-Zip:	HOMESTEAD FL 33030	City-State-Zip:	HOMESTEAD FL 33030

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: YOELVYS LOPEZ

OWNER

04/03/2013

Electronic Signature of Signing Officer/Director Detail

Date