

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000031171

**Entity Name:** DCA RESEARCH, LLC

**Current Principal Place of Business:**

3001 N.W. 49TH AVENUE  
SUITE 100  
LAUDERDALE LAKES, FL 33313

**Current Mailing Address:**

3001 N.W. 49TH AVENUE  
SUITE 100  
LAUDERDALE LAKES, FL 33313

**FEI Number:** 45-4755817

**Certificate of Status Desired:** No

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

LAW OFFICES OF FRYE & ASSOCIATES, PL  
20900 W. DIXIE HIGHWAY  
AVENTURA, FL 33180 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

**Authorized Person(s) Detail :**

Title MGRM  
Name GHITIS, ARNOLD  
Address 3001 N.W. 49TH AVENUE, SUITE 100  
City-State-Zip: LAUDERDALE LAKES FL 33313

Title MGRM  
Name CARR, MATTHEW  
Address 3001 N.W. 49TH AVENUE, SUITE 100  
City-State-Zip: LAUDERALE LAKES FL 33313

Title MGRM  
Name CUSNIR, HENRY  
Address 3001 N.W. 49TH AVENUE, SUITE 100  
City-State-Zip: LAUDERALE LAKES FL 33313

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ARNOLD GHITIS MD

**PRESIDENT**

**01/16/2013**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date