

**2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F03000004190

**Entity Name:** MDI OF SOUTH FLORIDA, INC.

**Current Principal Place of Business:**

70 HATFIELD LANE  
SUITE 206  
GOSHEN, NY 10924

**Current Mailing Address:**

70 HATFIELD LANE  
SUITE 206  
GOSHEN, NY 10924

**FEI Number:** 06-1524293

**Certificate of Status Desired:** Yes

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

KIRSCHENBAUM, MARC MR  
604 MASTERS WAY  
PALM BEACH GARDENS, FL 33418 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 DT  
Name KIRSCHENBAUM, MARC  
Address 70 HATFIELD LANE  
City-State-Zip: GOSHEN NY 10924

Title P  
Name KERR, STACEY S  
Address 70 HATFIELD LANE  
City-State-Zip: GOSHEN NY 10924

Title S  
Name MANDELL, JILL  
Address 70 HATFIELD LANE  
City-State-Zip: GOSHEN NY 10924

*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:** MARC KIRSCHENBAUM

DT

02/06/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date