

2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 601813

**FILED
Sep 26, 2011
Secretary of State**

Entity Name: HERSHMAN MEDICAL CENTER, P.A.

Current Principal Place of Business:

11479 S.W. 40TH STREET
MIAMI, FL 33165

New Principal Place of Business:

Current Mailing Address:

11479 S.W. 40TH STREET
MIAMI, FL 33165

New Mailing Address:

FEI Number: 59-1299464 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HERSHMAN, LLOYD
11479 SW 40 ST
MIAMI, FL 33165 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: P
Name: HERSHMAN, LLOYD
Address: 11479 SW 40 ST (BIRD RD)
City-St-Zip: MIAMI, FL 33165

Title: VP
Name: HERSHMAN, KENNETH
Address: 11479 SW 40 ST (BIRD RD)
City-St-Zip: MIAMI, FL 33165

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: LLOYD HERSHMAN

P

09/26/2011

Electronic Signature of Signing Officer or Director

Date