

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 604944

**FILED**  
**Jan 14, 2011**  
**Secretary of State**

**Entity Name:** HEALTHEXCEL MEDICAL GROUP AT PEMBROKE PINES, INC.

**Current Principal Place of Business:**

1150 N. UNIVERSITY DRIVE  
PEMBROKE PINES, FL 33024 US

**New Principal Place of Business:**

**Current Mailing Address:**

1150 N. UNIVERSITY DRIVE  
PEMBROKE PINES, FL 33024 US

**New Mailing Address:**

12905 SW 42ND STREET, STE 212  
MIAMI, FL 33175 US

**FEI Number:** 59-1508051

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GILDERMAN, LARRY I.  
1150 N. UNIVERSITY DRIVE  
PEMBROKE PINES, FL 33024 US

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** BARBARA A. BURKE, SECRETARY

01/14/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** COLLINS, KEITH  
**Address:** 1150 N. UNIVERSITY DRIVE  
**City-St-Zip:** PEMBROKE PINES, FL 33024 US

**Title:** TCFO  
**Name:** COLLADO, RICHARD  
**Address:** 1150 N. UNIVERSITY DRIVE  
**City-St-Zip:** PEMBROKE PINES, FL 33024 US

**Title:** D  
**Name:** COLLADO, RICHARD  
**Address:** 1150 N. UNIVERSITY DRIVE  
**City-St-Zip:** PEMBROKE PINES, FL 33024 US

**Title:** DS  
**Name:** VIDAL, MARISA  
**Address:** 1150 N. UNIVERSITY DRIVE  
**City-St-Zip:** PEMBROKE PINES, FL 33024 US

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:** RICHARD COLLADO

TCFO

01/14/2011

Electronic Signature of Signing Officer or Director

Date