

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000155025

FILED
Feb 04, 2008
Secretary of State

Entity Name: THE FAMILY HEALTH CENTER OF BROWARD INC

Current Principal Place of Business:

5920 JOHNSON ST
SUITE 104
HOLLYWOOD, FL 33021

New Principal Place of Business:

Current Mailing Address:

5920 JOHNSON ST SUITE 104
HOLLYWOOD, FL 33021

New Mailing Address:

FEI Number: 20-4045097

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ORTIZ, JESUS D
5920 JOHNSON ST SUITE 104
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

MEJIA, NELLY
5920 JOHNSON ST SUITE 104
HOLLYWOOD, FL 33021 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: NELLY MEJIA

02/04/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: MD () Delete
Name: MEJIA, JAIME H
Address: 5920 JOHNSON ST SUITE 104
City-St-Zip: HOLLYWOOD, FL 33021

Title: MR () Delete
Name: ORTIZ, JESUS D
Address: 5920 JOHNSON ST. SUITE 104
City-St-Zip: HOLLYWOOD, FL 33021

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MD (X) Change () Addition
Name: MEJIA, NELLY
Address: 5920 JOHNSON ST. SUITE 104
City-St-Zip: HOLLYWOOD, FL 33021

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: NELLY MEJIA

MD

02/04/2008

Electronic Signature of Signing Officer or Director

Date