

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000050720

Entity Name: PHYSICIANS MANAGEMENT NETWORK OF FLORIDA, INC.

Current Principal Place of Business:

782 NW 42ND AVENUE
S-550
MIAMI, FL 33126

Current Mailing Address:

782 NW 42ND AVENUE
S-550
MIAMI, FL 33126

FEI Number: 04-3651037

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RONALD S. LOWY, ESQUIRE
501 N.E. FIRST AVENUE, SUITE 200
MIAMI, FL 33132 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	CEO	Title	CIO
Name	BEHAR, VICTOR	Name	BLANCO, JOSE J
Address	782 NW 42ND AVENUE, S-550	Address	782 NW 42ND AVENUE, S-550
City-State-Zip:	MIAMI FL 33126	City-State-Zip:	MIAMI FL 33126

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: VICTOR BEHAR

CEO

02/04/2013

Electronic Signature of Signing Officer/Director Detail

Date