Current Principal Place of Business:

Entity Name: CENTRAL FLORIDA MEDICAL AND DIAGNOSTIC CLINIC, P.A.

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

6721 US HWY. 27 SOUTH SEBRING, FL 33876

Current Mailing Address:

DOCUMENT# P12000103155

6721 US HWY. 27 SOUTH SEBRING, FL 33876

FEI Number: 30-0759794

Name and Address of Current Registered Agent:

DUBOSE, JOHN D 1516 EAST COLONIAL DRIVE SUITE 105 ORLANDO, FL 32802 US Certificate of Status Desired: No

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

Officer/Director Detail :

Title	DIR	Title	PST
Name	IBRAHIM, GEORGE W	Name	IBRAHIM, JEAN
Address	6721 US HWY 27 SOUTH	Address	6721 US HWY 27 SOUTH
City-State-Zip:	SEBRING FL 33876	City-State-Zip:	SEBRING FL 33876
Title	VP		
Name	IBRAHIM, ALASTAIR		
Address	6721 US HWY 27 SOUTH		
City-State-Zip:	SEBRING FL 33876		

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: ALASTAIR IBRAHIM

VP

Electronic Signature of Signing Officer/Director Detail

Date