2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2016
Secretary of State
CC8522924428

DOCUMENT# P96000020000

Entity Name: PROFESSIONAL CENTER FOR INTERNAL MEDICINE, INC.

Current Principal Place of Business:

7853 GUNN HWY #399
TAMPA, FL 33626

Current Mailing Address:

7853 GUNN HWY #399
TAMPA, FL 33626 US

FEI Number: 59-3390527

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

O'ROURKE, JAMES R
7853 GUNN HWY #399
TAMPA, FL 33626 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	PD
Name	RUPIN, BANKER
Address	7853 GUNN HWY #399
City-State-Zip:	TAMPA FL 33626

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: RUPIN BANKER DIRECTOR 04/14/2016

Electronic Signature of Signing Officer/Director Detail — Date