2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 25, 2009
Secretary of State

DOCUMENT# 579581

Entity Name: THE GORDON CLINIC, INC.

Current Principal Place of Business:

344 WEST 65TH STREET #204
HIALEAH, FL 33012

New Principal Place of Business:

344 WEST 65TH STREET # 201-204
HIALEAH, FL 33012

Current Mailing Address:

344 WEST 65TH STREET #204
HIALEAH, FL 33012

New Mailing Address:

344 WEST 65TH STREET # 201-204
HIALEAH, FL 33012

FEI Number: 59-1841475 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GORDON, JR, ANTONIO MD
344 WEST 65TH STREET #204
HIALEAH, FL 33012 US

Name and Address of New Registered Agent:

GORDON, JR, ANTONIO MD
344 WEST 65TH STREET # 201-204
HIALEAH, FL 33012 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: 06/25/2009
Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: GORDON, JR, ANTONIO MD
Address: 344 WEST 65TH STREET #204
City-St-Zip: HIALEAH, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: GORDON, JR, ANTONIO MD
Address: 344 WEST 65TH STREET # 201-204
City-St-Zip: HIALEAH, FL 33012

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: ANTONIO GORDON JR. MD 06/25/2009
Electronic Signature of Signing Officer or Director — Date