

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06175

FILED  
Jan 07, 2011  
Secretary of State

**Entity Name:** PLAZA MEDICAL CENTERS, CORP.

**Current Principal Place of Business:**

11211 SW 152ND STREET  
MIAMI, FL 33157 US

**New Principal Place of Business:**

**Current Mailing Address:**

80 SW 8TH STREET  
STE 2000  
MIAMI, FL 33130

**New Mailing Address:**

**FEI Number:** 59-2042126      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ANGEL, SPENCER  
80 SW 8TH STREET  
SUITE 2000  
MIAMI, FL 33130 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** ANGEL, SPENCER  
**Address:** 80 SW 8TH STREET  
**City-St-Zip:** MIAMI, FL 33130

**Title:** VP  
**Name:** CAVANAUGH, MICHAEL  
**Address:** 3054 SHIPPING AVENUE  
**City-St-Zip:** COCONUT GROVE, FL 33133

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: SPENCER ANGEL

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

MMBR

01/07/2011

\_\_\_\_\_ Date