

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F43194

FILED  
Apr 03, 2008  
Secretary of State

Entity Name: FIRST-MED PRIMARY CARE ASSOCIATES, P.A.

## Current Principal Place of Business:

9380 SOUTHWEST 150 STREET  
SUITE 100  
MIAMI, FL 33176

## New Principal Place of Business:

## Current Mailing Address:

8401 SOUTHWEST 114 STREET  
MIAMI, FL 33156

## New Mailing Address:

8212 WEST FLAGLER STREET  
MIAMI, FL 33144

FEI Number: 59-2123773

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MCADORY, JOHN T DR.  
8401 SOUTHWEST 114 STREET  
MIAMI, FL 33156 US

## Name and Address of New Registered Agent:

MEDCHOICE HEALTH CENTERS, INC  
8212 WEST FLAGLER STREET  
MIAMI, FL 33144 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: ALEXANDER TIRADO

04/03/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: MCADORY, JOHN T DR.  
Address: 8401 SOUTHWEST 114 STREET  
City-St-Zip: MIAMI, FL 33156

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: MEDCHOICE HEALTH CEN, TERS, INC  
Address: 8212 WEST FLAGLER STREET  
City-St-Zip: MIAMI, FL 33144

Title: D ( ) Change (X) Addition  
Name: TIRADO, ALEXANDER DIR  
Address: 8212 WEST STREET  
City-St-Zip: MIAMI, FL 33144

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: ALEXANDER TIRADO

DIR

04/03/2008

Electronic Signature of Signing Officer or Director

Date