

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F73849

FILED  
Apr 09, 2009  
Secretary of State

**Entity Name:** QUEENS MEDICAL CENTER AND CLINIC, INC.

**Current Principal Place of Business:**

110 N FEDERAL HIGHWAY  
302  
HALLANDALE, FL 33009 US

**New Principal Place of Business:**

**Current Mailing Address:**

7301 PEPPERTREE CIRCLE S.  
DAVIE, FL 33314 US

**New Mailing Address:**

FEI Number: 59-2170129      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SONI, GURBACHAN P  
7301 PEPPER TREE CIRCLE SOUTH  
DAVIE, FL 33314 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: SONI, GURBA CHAN P  
Address: 7301 PEPPERTREE CIR SOUTH  
City-St-Zip: FORT LAUDERDALE, FL 33314

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D, (X) Change ( ) Addition  
Name: SONI, GURBACHAN P  
Address: 7301 PEPPERTREE CIR SOUTH  
City-St-Zip: FORT LAUDERDALE, FL 33314

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: GURBACHAN P SONI

P

04/09/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date