

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H16945

FILED
Mar 15, 2011
Secretary of State

Entity Name: FOREST HILLS HEALTH CARE, INC.

Current Principal Place of Business:

C/O SUMITA J. PATEL
116 W BOUGAINVILLEA AVE
TAMPA, FL 33612

New Principal Place of Business:

Current Mailing Address:

C/O SUMITA J. PATEL
116 W BOUGAINVILLEA AVE
TAMPA, FL 33612

New Mailing Address:

FEI Number: 59-2440113

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATEL, SUMITA J
116 W BOUGAINVILLEA AVE
TAMPA, FL 33612 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: P
Name: PATEL, SUMITA J
Address: 12402 MEMORIAL HWY
City-St-Zip: TAMPA, FL 33635

Title: DS
Name: PATEL, PRAVIN D
Address: 17605 HACKAMORE PL
City-St-Zip: LUTZ, FL 335495685

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: PRAVIN D. PATEL

DS

03/15/2011

Electronic Signature of Signing Officer or Director

Date