

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03253

FILED
Jan 15, 2009
Secretary of State

Entity Name: MEDICAL TIME PROFESSIONAL CONDOMINIUM, INC.

Current Principal Place of Business:

7050 N.W. 4TH STREET
PLANTATION, FL 33317

New Principal Place of Business:

Current Mailing Address:

7050 N.W. 4TH STREET
PLANTATION, FL 33317

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JANCKO, JOEL
7050 NW 4TH ST
PLANTATION, FL 33317 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: DP () Delete
Name: CHIRINOS, RODOLFO A
Address: 7050 NW 4 STR
City-St-Zip: PLANTATION, FL

Title: SD () Delete
Name: RIVERA, ROBERTO
Address: 7050 NW 4 STR
City-St-Zip: PLANTATION, FL

Title: TD () Delete
Name: CHONG, GRACIELA
Address: 7050 NW 4TH ST STE 206
City-St-Zip: PLANTATION, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RODOLFO CHIRINOS

DIR

01/15/2009

Electronic Signature of Signing Officer or Director

Date