

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000067645

FILED  
Apr 28, 2008  
Secretary of State

Entity Name: JOHNSON INTERNAL MEDICINE, INC.

## Current Principal Place of Business:

1601 CLINT MOORE ROAD  
SUITE 155  
BOCA RATON, FL 33487

## New Principal Place of Business:

## Current Mailing Address:

1601 CLINT MOORE ROAD  
SUITE 155  
BOCA RATON, FL 33487

## New Mailing Address:

FEI Number: 65-1026163      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FILINGS, INC.  
3732 N.W. 16TH STREET  
FORT LAUDERDALE, FL 33311      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: PD ( ) Delete  
Name: JOHNSON, C. ROBERT  
Address: 5458 TOWN CENTER RD., STE 25  
City-St-Zip: BOCA RATON, FL 33486

Title: VD ( ) Delete  
Name: JOHNSON, LISA  
Address: 5458 TOWN CENTER RD., STE 25  
City-St-Zip: BOCA RATON, FL 33486

Title: TD ( ) Delete  
Name: SALY, RITA  
Address: 5458 TOWN CENTER RD., STE 25  
City-St-Zip: BOCA RATON, FL 33486

Title: SD ( ) Delete  
Name: GUTIERREZ, FRANCIS  
Address: 5458 TOWN CENTER RD., STE 25  
City-St-Zip: BOCA RATON, FL 33486

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: JOHNSON, C. ROBERT  
Address: 1601 CLINT MOORE RD STE155  
City-St-Zip: BOCA RATON, FL 33487

Title: VD (X) Change ( ) Addition  
Name: JOHNSON, LISA  
Address: 1601 CLINT MOORE RD STE155  
City-St-Zip: BOCA RATON, FL 33487

Title: TD (X) Change ( ) Addition  
Name: SALY, RITA  
Address: 1601 CLINT MOORE RD STE155  
City-St-Zip: BOCA RATON, FL 33487

Title: SD (X) Change ( ) Addition  
Name: GUTIERREZ, FRANCIS  
Address: 1601 CLINT MOORE RD STE155  
City-St-Zip: BOCA RATON, FL 33487

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: LISA JOHNSON

VP

04/28/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date