

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000079878

Entity Name: H & L MEDICAL CENTER INC.

FILED  
Apr 17, 2008  
Secretary of State

## Current Principal Place of Business:

2750 WEST 68 STREET  
STE. 224  
HIALEAH, FL 33016

## New Principal Place of Business:

## Current Mailing Address:

2750 WEST 68 STREET  
STE. 224  
HIALEAH, FL 33016

## New Mailing Address:

FEI Number: 65-1034486

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

RUTZ, ROBERT  
15255 NW 87 PL  
MIAMI LAKES, FL 33018 US

## Name and Address of New Registered Agent:

RUIZ, ROBERT  
2750 WEST 68 STREET  
STE 224  
HIALEAH, FL 33016 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: ROBERT RUIZ

04/17/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: RUIZ, ROBERT  
Address: 6190 W 5 LN  
City-St-Zip: HIALEAH, FL 33012

Title: V ( ) Delete  
Name: MARTINEZ, HENRY D  
Address: 6190 W 5 LN  
City-St-Zip: HIALEAH, FL 33012

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: RUIZ, ROBERT  
Address: 2750 WEST 68 STREET  
City-St-Zip: HIALEAH, FL 33016

Title: V (X) Change ( ) Addition  
Name: MARTINEZ, HENRY D  
Address: 2750 WEST 68 STREET  
City-St-Zip: HIALEAH, FL 33016

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: ROBERT RUIZ

P

04/17/2008

Electronic Signature of Signing Officer or Director

Date