2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000000002

Entity Name: SFBC FT. MYERS, INC.

FILED May 01, 2006 Secretary of State

Current Pi	rincipal Place	of Business:	New Prin	cipal Place of Business:
11190 BISC N. MIAMI, F	CAYNE BLVD. FL 33181		11190 BIS MIAMI, FL	SCAYNE BLVD. . 33181
Current M	ailing Addres	ss:	New Mail	ling Address:
11190 BISC N. MIAMI, F	CAYNE BLVD. FL 33181		11190 BIS MIAMI, FL	SCAYNE BLVD. . 33181
FEI Number:	65-1080325	FEI Number Applied For()	FEI Number Not App	Dicable () Certificate of Status Desired ()
Name and	Address of C	Current Registered Agent:	Name and	d Address of New Registered Agent:
1555 PAĹN STE 310 W. PALM E	MICHAEL D M BEACH LAK BEACH, FL 33 named entity:	3401 US	urpose of changing	its registered office or registered agent, or bot
	of Florida.	·		
SIGNATUF				
	Electror	nic Signature of Registered Age	ent	Date
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	t receive the prior noti	ce.
	S AND DIREC	- , ,	ADDITIO	NS/CHANGES TO OFFICERS AND DIRECT
Title: Name: Address: City-St-Zip:	D () KRINSKY, LISA 11190 BISCAY N. MIAMI, FL 3	NE BLVD.	Title: Name: Address: City-St-Zip:	VD (X) Change () Addition HOLMES, GREGORY DR. 11190 BISCAYNE BLVD. N. MIAMI, FL 33181
Title: Name: Address: City-St-Zip:	SD (HANTMAN, ARI 11190 BISCAY N. MIAMI, FL 3	NE BLVD.	Title: Name: Address: City-St-Zip:	P (X) Change () Addition PHILLIPS, BARRIE DR. 11190 BISCAYNE BLVD. N. MIAMI, FL 33181
Title: Name: Address: City-St-Zip:	VD (HOLMES, GRE 11190 BISCAY N. MIAMI, FL 3	NE BLVD.	Title: Name: Address: City-St-Zip:	T (X) Change () Addition NATAN, DAVID 11190 BISCAYNE BLVD. N. MIAMI, FL 33181
Title: Name: Address: City-St-Zip:	P (X PHILLIPS, BAR 11190 BISCAY N. MIAMI, FL 3	NE BLVD.	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	T (X NATAN, DAVID 11190 BISCAY N. MIAMI, FL 3		Title: Name: Address: City-St-Zip:	()Change ()Addition

I hereby certify that the information supplied with this filing does not qualify for the 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.

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