2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000034018

Entity Name: SOUTH FLORIDA MEDICAL CONSULTANTS, INC.

FILED Apr 05, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6140 PINE TREE DRIVE MIAMI BEACH, FL 33140 US

Current Mailing Address: New Mailing Address:

401 W. CEILO AVE 2066 CARLTON PL

RIDGECREST, CA 93555 US RIVERSIDE, CA 92507 US

FEI Number: 65-1091084 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

COOPER, EDWARD
390 W YORBA
PALM SPRINGS , CA, FL 92262 US
COOPER, EDWARD
11423 SW 115 LANE
MIAMI, FL 33176 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: EDWARD COOPER 04/05/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD () Delete Title: **PSTD** (X) Change () Addition COOPER, EDWARD COOPER, EDWARD Name: Name: 809 N.NORMA ST APT E 2066 CARLTON PL Address: Address: City-St-Zip: RIDGECREST, CA 93555 US City-St-Zip: RIVERSIDE, CA 92507 US

 $\label{eq:title:V} {\sf Title:} \qquad {\sf V} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad {\sf (X) Change () Addition}$

Name: COOPER, EDWARD Name: COOPER, EDWARD

Address: 390 W. YORBA Address: 2066

City-St-Zip: PALM SPRINGS, CA 92262 US City-St-Zip: RIVERSIDE, CA 92507 US

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: EDWARD COOPER PRES 04/05/2009