

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000051197

FILED
Mar 23, 2009
Secretary of State

Entity Name: TOTAL MEDICAL CONSULTANTS, INC.

Current Principal Place of Business:

99 NW MIAMI GARDENS DRIVE SUITE 206
NORTH MIAMI BEACH, FL 33169

New Principal Place of Business:

99 NW MIAMI GARDENS DRIVE SUITE 206
MIAMI GARDENS, FL 33169

Current Mailing Address:

99 NW MIAMI GARDENS DRIVE SUITE 206
NORTH MIAMI BEACH, FL 33169

New Mailing Address:

99 NW MIAMI GARDENS DRIVE SUITE 206
MIAMI GARDENS, FL 33169

FEI Number: 65-1110283

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KASBAR, JOHN A
3880 SHERIDAN STREET
HOLLYWOOD, FL 33021 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: CEO () Delete
Name: WEISS, CHARLES CEO
Address: 99 NW MIAMI GARDENS DRIVE, SUITE 206
City-St-Zip: NORTH MIAMI, FL 33169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: WEISS, CHARLES CEO
Address: 99 NW MIAMI GARDENS DRIVE, SUITE 206
City-St-Zip: MIAMI GARDENS, FL 33169

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: CHARLES WEISS

CEO

03/23/2009

Electronic Signature of Signing Officer or Director

Date