

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000068337

Entity Name: AZJ MEDICAL CENTER INC.

FILED
Jan 04, 2007
Secretary of State

Current Principal Place of Business:

700 S.W. 57 AVENUE
MIAMI, FL 33144

New Principal Place of Business:

Current Mailing Address:

710 S.W. 57 AVENUE
MIAMI, FL 33144

New Mailing Address:

FEI Number: 65-1120973

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ZAYAS, ALFREDO V
600 GRAPETREE DRIVE
APT. 8GN
KEY BISCAYNE, FL 33149 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: P/S () Delete
Name: ZAYAS, ALFREDO V
Address: 600 GRAPETREE DR. APT. 8GN
City-St-Zip: KEY BISCAYNE, FL 33149

Title: VP/T () Delete
Name: ZAYAS, SARA J
Address: 600 GRAPETREE DR. APT. 8GN
City-St-Zip: KEY BISCAYNE, FL 33149

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: ALFREDO V ZAYAS

PS

01/04/2007

Electronic Signature of Signing Officer or Director

Date