

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000093089

Entity Name: TOTAL FOOT CARE CLINIC, INC.

FILED
Jan 04, 2007
Secretary of State

Current Principal Place of Business:

182 EAST 49 ST
HIALEAH, FL 33013

New Principal Place of Business:

Current Mailing Address:

182 EAST 49 ST
HIALEAH, FL 33013

New Mailing Address:

FEI Number: 65-1141960

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VERJANO, VICTOR
600 E 25 STREET STE E
HIALEAH, FL 33012 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: DPS () Delete
Name: VERJANO, VICTOR
Address: 600 E 25 STREET STE E
City-St-Zip: HIALEAH, FL 33012

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DPS () Change (X) Addition
Name: REYES, RICARDO
Address: 182 EAST 49 STREET
City-St-Zip: HIALEAH, FL 33013

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: RICARDO REYES

DPS

01/04/2007

Electronic Signature of Signing Officer or Director

Date