

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000042943

FILED
Apr 30, 2012
Secretary of State

Entity Name: ATLANTIC ACU-MEDICAL CENTER CORP.

Current Principal Place of Business:

3125 W. ATLANTIC BLVD
SUITE NO. 11
POMPANO BEACH, FL 33069 US

New Principal Place of Business:

Current Mailing Address:

3146 NW 68TH STREET
SUITE NO. 1
FORT LAUDERDALE, FL 333091206 US

New Mailing Address:

7510 NW 41ST STREET
CORAL SPRINGS, FL 33065 US

FEI Number: 03-0428698

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAUREPAS, HENRY
4253 NW 55TH PLACE
COCONUT CREEK, FL 33073 US

Name and Address of New Registered Agent:

FILS, JONAS
7510 NW 41ST STREET
CORAL SPRINGS, FL 33065 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: JONAS FILS

04/30/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PCEO
Name: MAUREPAS, HENRY COB
Address: 4253 NW 55TH PLACE
City-St-Zip: COCONUT CREEK, FL 33073

Title: CTD
Name: FILS, JONAS
Address: 7510 NW 41ST ST.
City-St-Zip: CORAL SPRINGS, FL 33065

I hereby 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 all other like empowered.

SIGNATURE: JONAS FILS

CEO

04/30/2012

Electronic Signature of Signing Officer or Director

Date