2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2011
Secretary of State

DOCUMENT# P02000067191

Entity Name: AMERICAN PROFESSIONAL HEALTH CARE INC.

Current Principal Place of Business:

7900 NW 33RD ST STE 101
DAVIE, FL 330242246

New Principal Place of Business:

1101 COLONY POINT CIRCLE
411
PEMBROKE PINES, FL 33026

Current Mailing Address:

7900 NW 33RD ST STE 101
DAVIE, FL 330242246

New Mailing Address:

1101 COLONY POINT CIRCLE
411
PEMBROKE PINES, FL 33026

FEI Number: 82-0550879 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SUITE, ARTHUR L
7900 NW 33RD ST STE 101
DAVIE, FL 330242246 US

Name and Address of New Registered Agent:

SUITE, ARTHUR L
1101 COLONY POINT CIRCLE
411
PEMBROKE PINES, FL 33026 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: ARTHUR L. SUITE 04/25/2011
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D
Name: SUITE, ARTHUR L
Address: 1101 COLONY POINT CIR BLDG 4 APT 411
City-St-Zip: PEMBROKE PINES, FL 33026 US

Title: D
Name: SUITE, SYDNEY O
Address: 13451 LURAY RD
City-St-Zip: SOUTHWEST RANCHES, FL 33330

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: ARTHUR L. SUITE DIR 04/25/2011
Electronic Signature of Signing Officer or Director Date