## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000067191

Entity Name: AMERICAN PROFESSIONAL HEALTH CARE INC.

FILED Apr 16, 2012 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1101 COLONY POINT CIRCLE 1400 SW 131 WAY BLDG Q

405 411

PEMBROKE PINES, FL 33026 PEMBROKE PINES, FL 33027

**Current Mailing Address: New Mailing Address:** 

1400 SW 131 WAY BLDG Q 1101 COLONY POINT CIRCLE 405

PEMBROKE PINES, FL 33027 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: Name and Address of New Registered Agent:

SUITE, ARTHUR L SUITE, ARTHUR L 1101 COLONY POINT CIRCLE 1400 ŚW 131 WAY BLDG Q

PEMBROKE PINES, FL 33026 US PEMBROKE PINES, FL 33027 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: 04/16/2012

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

SUITE, ARTHUR L Name:

1400 SW 131 WAY BLDG Q APT 405 Address: City-St-Zip: PEMBROKE PINES, FL 33027 US

Title:

Name: SUITE, SYDNEY O 13451 LURAY RD Address:

SOUTHWEST RANCHES, FL 33330 City-St-Zip:

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 D 04/16/2012