

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000010715

FILED  
Jan 22, 2009  
Secretary of State

Entity Name: MEDCHOICE HEALTH CENTERS, INC

## Current Principal Place of Business:

8212 WEST FLAGLER STREET  
MIAMI, FL 33144

## New Principal Place of Business:

16260 NE 13TH AVE  
NORHT MIAMI, FL 33162

## Current Mailing Address:

8212 WEST FLAGLER STREET  
MIAMI, FL 33144

## New Mailing Address:

16260 NE 13TH AVE  
NORHT MIAMI, FL 33162

FEI Number: 03-0506056

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TIRADO, ALEXANDER  
8212 WEST FLAGLER ST  
MIAMI, FL 33144 US

## Name and Address of New Registered Agent:

TIRADO, ALEXANDER  
16260 NE 13TH AVE  
NORHT MIAMI, FL 33162 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: ALEX TIRADO

01/22/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: TIRADO, ALEXANDER  
Address: 8212 WEST FLAGLER STREET  
City-St-Zip: MIAMI, FL 33144

Title: D (X) Delete  
Name: OTERO, JUAN O MD  
Address: 8212 WEST FLAGLER STREET  
City-St-Zip: MIAMI, FL 33144

Title: D (X) Delete  
Name: TIRADO, LOURDES M  
Address: 8212 WEST FLAGLER STREET  
City-St-Zip: MIAMI, FL 33144

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: TIRADO, ALEXANDER  
Address: 16260 NE 13TH AVE  
City-St-Zip: NORHT MIAMI, FL 33162

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 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: ALEX TIRADO

D

01/22/2009

Electronic Signature of Signing Officer or Director

Date