

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000044208

FILED
Jan 05, 2012
Secretary of State

Entity Name: OROZCO MEDICAL CENTER, INC

Current Principal Place of Business:

8210 WEST WATERS AVENUE
TAMPA, FL 33615

New Principal Place of Business:

8210 WEST WATERS AVENUE
TAMPA, FL 33615 UN

Current Mailing Address:

8210 WEST WATERS AVENUE
TAMPA, FL 33615

New Mailing Address:

8210 WEST WATERS AVENUE
TAMPA, FL 33615 UN

FEI Number: 41-2091050

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OROZCO, CLAUDIA P
8210 WEST WATERS AVENUE
TAMPA, FL 33615 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

OFFICERS AND DIRECTORS:

Title: P
Name: OROZCO, CLAUDIA
Address: 8210 WEST WATERS AVE
City-St-Zip: TAMPA, FL 33615

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: CLAUDIA OROZCO

PRES

01/05/2012

Electronic Signature of Signing Officer or Director

Date