

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000061611

FILED
Nov 20, 2009
Secretary of State

Entity Name: GARG MEDICAL CENTER INC

Current Principal Place of Business:

2050 WEST BAY DRIVE
LARGO, FL 33770

New Principal Place of Business:

Current Mailing Address:

2050 WEST BAY DRIVE
LARGO, FL 33770

New Mailing Address:

FEI Number: 02-0693740

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GARG, ANIT
9988 LAKE SEMINOLE DR. W.
LARGO, FL 33773 US

Name and Address of New Registered Agent:

GARG, ANIT MD
14210 85TH AVE
SEMINOLE, FL 33776 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: ANIT GARG, MD

11/20/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GARG, ANIT
Address: 9988 LAKE SEMINOLE DRIVE WEST
City-St-Zip: LARGO, FL 33773

Title: VPST () Delete
Name: GARG, RENEE M
Address: 9988 LAKE SEMINOLE DRIVE WEST
City-St-Zip: LARGO, FL 33770

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GARG, ANIT MD
Address: 14210 85TH AVE
City-St-Zip: SEMINOLE, FL 33776

Title: VPST (X) Change () Addition
Name: GARG, RENEE M
Address: 14210 85TH AVE
City-St-Zip: SEMINOLE, FL 33776

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: RENEE M. GARG

VPST

11/20/2009

Electronic Signature of Signing Officer or Director

Date