## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000119266

Entity Name: SOUTH FLORIDA UROLOGY CENTER, INC.

FILED Jan 23, 2012 Secretary of State

Current Princi	pal Place of Business:	New Principal Place of Business

601 N. FLAMINGO ROAD 601 N. FLAMINGO ROAD

SUITE 308 SUITE 203

PEMBROKE PINES, FL 33028 US PEMBROKE PINES, FL 33028 US

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

601 N. FLAMINGO ROAD SUITE 203 601 N. FLAMINGO ROAD

SUITE 308

PEMBROKE PINES, FL 33028 PEMBROKE PINES, FL 33028 US US

FEI Number: 65-1207453 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:

JAYSON, MAURY 601 N. FLAMINGO ROAD, SUITE 203 PEMBROKE PINES, FL 33028

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:**

PRES Title:

JAYSON, MAURY Name:

601 N. FLAMINGO ROAD, SUITE 203 Address: City-St-Zip: PEMBROKE PINES, FL 33028 US

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: MAURY JAYSON **PRES** 01/23/2012