

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000003179

**FILED**  
**Mar 03, 2010**  
**Secretary of State**

**Entity Name:** DOCTORS GROUP MANAGEMENT, INC.

**Current Principal Place of Business:**

14411 COMMERCE WAY  
STE. 420  
MIAMI LAKES, FL 33016

**New Principal Place of Business:**

8600 NW 17TH ST  
STE. 160  
DORAL, FL 33126

**Current Mailing Address:**

14411 COMMERCE WAY  
STE. 420  
MIAMI LAKES, FL 33016

**New Mailing Address:**

8600 NW 17TH ST  
STE. 160  
DORAL, FL 33126

**FEI Number:** 20-0534962

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

QUEVEDO, FELIX  
14411 COMERCE WAY  
STE. 420  
MIAMI LAKES, FL 33016 US

**Name and Address of New Registered Agent:**

QUEVEDO, FELIX  
8600 NW 17TH ST  
STE. 160  
DORAL, FL 33126 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: FELIX QUEVEDO

03/03/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P  
Name: QUEVEDO, FELIX  
Address: 8600 NW 17TH ST SUITE 160  
City-St-Zip: DORAL, FL 33126

Title: VP  
Name: QUEVEDO, MARGARITA  
Address: 8600 NW 17TH ST SUITE 160  
City-St-Zip: DORAL, FL 33126

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: FELIX QUEVEDO

P

03/03/2010

Electronic Signature of Signing Officer or Director

Date