

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000065515

FILED
Mar 03, 2009
Secretary of State

Entity Name: SUNSHINE STATE MEDICAL, INC.

Current Principal Place of Business:

5575 SOUTH SEMORAN BOULEVARD
SUITE 503
ORLANDO, FL 32822

New Principal Place of Business:

5425 SOUTH SEMORAN BOULEVARD
SUITE 6-A
ORLANDO, FL 32822

Current Mailing Address:

5575 SOUTH SEMORAN BOULEVARD
SUITE 503
ORLANDO, FL 32822

New Mailing Address:

5425 SOUTH SEMORAN BOULEVARD
SUITE 6-A
ORLANDO, FL 32822

FEI Number: 56-2454234

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BHAVSAR, GIFFORD & HAGOOD
1053 MAITLAND CENTER COMMONS
SUITE 101
MAITLAND, FL 32751 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ORTIZ, MARTHA
Address: 2301 DRYBURGH COURT
City-St-Zip: ORLANDO, FL 32828 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MARTHA ORTIZ

PRES

03/03/2009

Electronic Signature of Signing Officer or Director

Date