

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000111784

FILED
Oct 17, 2006
Secretary of State**Entity Name:** SOUTH FLORIDA COMMUNITY CLINIC, INC.**Current Principal Place of Business:**7171 CORAL WAY
SUITE 219
MIAMI, FL 33155**New Principal Place of Business:**7171 CORAL WAY
SUITE 207
MIAMI, FL 33155**Current Mailing Address:**7171 CORAL WAY
SUITE 219
MIAMI, FL 33155**New Mailing Address:**7171 CORAL WAY
SUITE 207
MIAMI, FL 33155**FEI Number:** 20-1439551**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DIAZ, MARIA A
2294 W 68 ST
HIALEAH, FL 33016 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:** PD () Delete
Name: DIAZ, MARIA A
Address: 2294 W 68 ST
City-St-Zip: HIALEAH, FL 33016**Title:** VP () Delete
Name: CORREA, FLAVIO
Address: 7171 CORAL WAY # 219
City-St-Zip: MIAMI, FL 33155**Title:** TS () Delete
Name: REVUELTA, TAMARA
Address: 7171 CORAL WAY # 219
City-St-Zip: MIAMI, FL 33155**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** VP (X) Change () Addition
Name: CORREA, FLAVIO
Address: 7171 CORAL WAY # 207
City-St-Zip: MIAMI, FL 33155**Title:** VP (X) Change () Addition
Name: PEREZ, WILFREDO
Address: 7171 CORAL WAY # 207
City-St-Zip: MIAMI, FL 33155**Title:** TS () Change (X) Addition
Name: REVUELTA, TAMARA
Address: 7171 CORAL WAY # 207
City-St-Zip: MIAMI, FL 33155

I hereby certify that the information supplied with this filing does not qualify for the 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: FLAVIO CORREA

VP

10/17/2006

Electronic Signature of Signing Officer or Director

Date