2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 19, 2009
Secretary of State

DOCUMENT# P04000145240

Entity Name: DR. J'S OCEAN MEDICAL CENTER, INC.

Current Principal Place of Business:

2772 EAST ATLANTIC BLVD
POMPANO BEACH, FL 33060

New Principal Place of Business:

2772 EAST ATLANTIC BLVD
POMPANO BEACH, FL 33062

Current Mailing Address:

2772 EAST ATLANTIC BLVD
POMPANO BEACH, FL 33060

New Mailing Address:

2772 EAST ATLANTIC BLVD
POMPANO BEACH, FL 33062

FEI Number: 41-2154984 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TORRES, JOSE A
2772 EAST ATLANTIC BLVD
POMPANO BEACH, FL 33060 US

Name and Address of New Registered Agent:

TORRES, JOSE A
2772 EAST ATLANTIC BLVD
POMPANO BEACH, FL 33062 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: JOSE A. TORRES 06/19/2009
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: P ( ) Delete
Name: TORRES, JOSE
Address: 2772 EAST ATLANTIC BLVD
City-St-Zip: POMPANO BEACH, FL 33060

Title: VP (X) Delete
Name: TORRES, JOSE
Address: 2772 EAST ATLANTIC BLVD.,
City-St-Zip: POMPANO BEACH, FL 33060

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: TORRES, JOSE A
Address: 2772 EAST ATLANTIC BLVD
City-St-Zip: POMPANO BEACH, FL 33062

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: JOSE A. TORRES P 06/19/2009
Electronic Signature of Signing Officer or Director Date