

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000149862

FILED  
Mar 03, 2008  
Secretary of State

Entity Name: SUNSET MEDICAL CENTER INC.

## Current Principal Place of Business:

7000 SW 62 AVE  
PH-A  
MIAMI, FL 33143

## New Principal Place of Business:

9835 SW 72ND STREET  
208  
MIAMI, FL 33173

## Current Mailing Address:

7000 SW 62 AVE  
PH-A  
MIAMI, FL 33143

## New Mailing Address:

9835 SW 72ND STREET  
208  
MIAMI, FL 33173

FEI Number: 13-4288486

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GUTIERREZ, PETE MD  
7000 SW 62 AVE  
PH-A  
MIAMI, FL 33143 US

## Name and Address of New Registered Agent:

GUTIERREZ, PETE MD  
9835 SW 72ND STREET  
208  
MIAMI, FL 33173 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: PETE A. GUTIERREZ

03/03/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VP ( ) Delete  
Name: GUTIERREZ, PETE MD  
Address: 7000 SW 62 AVE PH-A  
City-St-Zip: MIAMI, FL 33143

Title: P ( ) Delete  
Name: FERNANDEZ, ENRIQUE MD  
Address: 7000 SW 62 AVE PH-A  
City-St-Zip: MIAMI, FL 33143

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition  
Name: GUTIERREZ, PETE MD  
Address: 9835 SW 72ND STREET SUITE #208  
City-St-Zip: MIAMI, FL 33173

Title: P (X) Change ( ) Addition  
Name: FERNANDEZ, ENRIQUE MD  
Address: 9835 SW 72ND STREET SUITE #208  
City-St-Zip: MIAMI, FL 33173

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: PETE A. GUTIERREZ

VPRE

03/03/2008

Electronic Signature of Signing Officer or Director

Date