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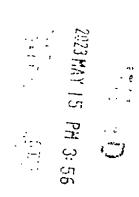
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JUL 19 2023

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Healthpark Medical Center Inc		
Name of Corporation		
DOCUMENT NUMBER: P04000173302		
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.		
Please return all correspondence concerning this	s matter to the following:	
Federico J Martinez		
Name of Contact Person		
Healthpark Medical Center Inc		
Firm/Company		
2853 Executive Park Drive Suite 104		
Address		
Weston . Florida ,33331		
City/State and Zip Code		
info@healthparkmedical.com	n	
E-mail address: (to be used for future annua	l report notification)	
For further information concerning this matter.	please call:	
Federico J Martinez	at (954) 478-2911	
Name of Contact Person	at (954) 478-2911 Area Code & Daytime Telephone Number	
Enclosed is a \$35.00 check made payable to the	Department of State.	
Mailing Address: Amendment Section	Street Address: Amendment Section	
	Division of Corporations Division of Corporations	
P.O. Box 6327 The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a corporation organ	92, 607.1508, or 617.1508, Florida Statute nized under the laws of the State of <u>Fl</u> vered agent, or both, in the State of Florida	WILL.
1. The name of t	he corporation: Healthpark Medical Cente	er Inc	
2. The principal	office address: 2853 Executive Park Drive	: Suite 104 Weston Florida 33331	
3. The mailing a	ddress (if different):		
4. Date of incorp	ddress (if different): $\frac{ 2/29/200 }{ 2/29/200 }$	Document number: P04000173302	
	street address of the current registered a tment of State: (If resigned, enter resigned	agent and registered office on file with the ed)	
	2853 Executive Park Drive Suite 104 Wes	ston Florida 33331	
			200 HAY 15
		·	5
6. The name and (if changed):	street address of the new registered age	nt (if changed) and /or registered office	PH 3: 56
	2853 Executive Park Drive Suite 104 Wes	ston Florida 33331	ं ज
	P.O. Bo	x NOT acceptable	
The street addre	ss of its registered office and the street be identical.	address of the business office of its regis	stered agent.
-		d by its board of directors or by an office of the change.	
<i>V</i>	e of an officer or prector	FEDERICO J. MAN Printed or typed name and title	TINEZ
I further agrée t	the appointment as registered agent an o comply with the provisions of all stat d I am familiar with and accept the obl ng filed merely to reflect a change in th been notified in writing of this change	nd agree to act in this capacity, sutes relative to the proper and complete ligation of my position as registered agence registered office address, I hereby con	performance it. Or if this firm that the
Tex	anio Mano	5/4/2023	
Sign	nature of Registered Agent	Date	
If signing on bel	half of an entity:		
FETSPIC	D' J. MANTIWEZ roed or Printed Name		

* * * FILING FEE: \$35.00 * * *



Healthpark Medical Center Inc. <info@healthparkmedical.com>

Question about my Update or Change our Information

corphelp <corphelp@dos.myflorida.com>

Fri, Apr 28, 2023 at 3:43 PM

To: "Healthpark Medical Center Inc." <info@healthparkmedical.com>

The address information has been updated, but the Registered Agent's Address cannot be changed via email, this address change requires a form and fee of \$35.00 through the mail.

Stacy

Internet Access

www.sunbiz.org

****NOTE: Need to update Sunbiz ASAP, If your entity was formed prior to January 1 of this year, To maintain your "Active" status with our office, all 2023 Annual Reports will be due beginning January 1, 2023 through May 1, 2023. All filings after May 1st will incur a \$400 mandatory late fee.

[Quoted text hidden]

NEED. CHANGESTER Quel Form:



Department of State / Division of Corporations / Search Records / Search by Entity Name /

Detail by Entity Name

Florida Profit Corporation
HEALTHPARK MEDICAL CENTER, INC.

Filing Information

Document Number

P04000173302

FEI/EIN Number

20-2085998

Date Filed

12/29/2004

Effective Date

01/03/2005

State

FL

Status

ACTIVE

Principal Address

2853 Executive Park Drive Suite 104

weston, FL 33331

Changed: 04/27/2023

Mailing Address

2853 Executive Park Drive Suite 104

weston, FL 33331

Changed: 04/27/2023

Registered Agent Name & Address

MARTINEZ, FEDERICO J 2500 N MILITARY TRAIL

SUITE 310

BOCA RATON, FL 33431

Name Changed: 04/21/2022

Address Changed: 04/21/2022

Officer/Director Detail
Name & Address

Title P

MARTINEZ, FEDERICO 2853 EXECUTIVE PARK DRIVE SUITE 104 WESTON, FL 33331

Annual Reports

Report Year	Filed Date
2021	04/14/2021
2022	04/21/2022
2023	03/09/2023

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01/06/2012 ANNUAL REPORT	View image in PDF format
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