

2012 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 08, 2012
Secretary of State

Entity Name: HEALTH CARE OF SOUTH FLORIDA CORP

Current Principal Place of Business:

1111 PARK CENTRE BLVD., STE 103
MIAMI GARDENS, FL 33169

New Principal Place of Business:

Current Mailing Address:

1111 PARK CENTRE BLVD., STE 103
MIAMI GARDENS, FL 33169

New Mailing Address:

FEI Number: 20-2628584

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUSHER, OLEG
1111 PARK CENTRE BLVD., STE 103
MIAMI GARDENS, FL 33169 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: P
Name: LUSHER, OLEG
Address: 16950 N BAY RD, UNIT 507
City-St-Zip: SUNNY ISLES BCH, FL 33160

Title: D
Name: MURAT, ALLA
Address: 1830 S. OCEAN DR. UNIT 3206
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: V
Name: KARAPETIAN, KARREN
Address: 16711 COLLINS AVE UNIT 803
City-St-Zip: SUNNY ISLES BCH, FL 33160

I hereby 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 all other like empowered.

SIGNATURE: OLEG LUSHER

P

03/08/2012

Electronic Signature of Signing Officer or Director

Date