

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000073652

FILED
Apr 10, 2006
Secretary of State

Entity Name: TOTAL FAMILY MEDICAL CENTER, CO.

Current Principal Place of Business:

7650 WEST FLAGLER ST.
MIAMI, FL 33144 US

New Principal Place of Business:

Current Mailing Address:

7650 WEST FLAGLER ST.
MIAMI, FL 33144 US

New Mailing Address:

FEI Number: 86-1141641

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

A1A REGISTERED AGENT INC.
92 SADBERRY ROAD
QUINCY, FL 32351 US

Name and Address of New Registered Agent:

PEREZ, ALICIA B P.S
7650 WEST FLAGLER ST
MIAMI, FL 33144 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: ALICIA B PEREZ

04/10/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P, S () Delete
Name: PEREZ, ALICIA B
Address: 7650 WEST FLAGLER ST.
City-St-Zip: MIAMI, FL 33144 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: DIAZ, MAGDIEL VP
Address: 7650 WEST FLAGLER ST
City-St-Zip: MIAMI, FL 33144 US

Title: VP () Change (X) Addition
Name: DALLY, ALFREDO D VP
Address: 7650 WEST FLAGLER ST
City-St-Zip: MIAMI, FL 33144 US

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: ALICIA B PEREZ

P/S

04/10/2006

Electronic Signature of Signing Officer or Director

Date