

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000099816

FILED
Apr 24, 2012
Secretary of State

Entity Name: DAVIE MEDI CENTER INC.

Current Principal Place of Business:

1890 SW 57 AVE STE 107
MIAMI, FL 33155

New Principal Place of Business:

1890 SW 57 AVE
STE 107 - 108
MIAMI, FL 33155

Current Mailing Address:

1890 SW 57 AVE STE 107
MIAMI, FL 33155

New Mailing Address:

1890 SW 57 AVE STE 107 - 108
MIAMI, FL 33155

FEI Number: 14-1936430

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HURTADO, ALFONSO DR.
1890 SW 57 AVE STE 107
MIAMI, FL 33155 US

Name and Address of New Registered Agent:

HURTADO, ALFONSO DR.
1890 SW 57 AVE
STE 107 - 108
MIAMI, FL 33155 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: DR ALFONSO HURTADO

04/24/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: HURTADO, ALFONSO DR
Address: 1890 SW 57 AVE STE 107 - 108
City-St-Zip: MIAMI, FL 33155

Title: VP
Name: AVILA, JOSE L MD
Address: 1890 SW 57 AVENUE STE 107 - 108
City-St-Zip: MIAMI, FL 33155

Title: D
Name: SAFIRSTEIN, GEORGE MD
Address: 1890 SW 57 AVENUE STE 107 - 108
City-St-Zip: MIAMI, FL 33155

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: DR ALFONSO HURTADO

P

04/24/2012

Electronic Signature of Signing Officer or Director

Date