

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000024723

FILED
Apr 30, 2010
Secretary of State

Entity Name: OSLER MEDICAL CENTER, CORP.

Current Principal Place of Business:

246 NW 42ND AVE.
1ST FLOOR
MIAMI, FL 33126

New Principal Place of Business:

2901 W. OAKLAND PARK BLVD
SUITE B20
OAKLAND PARK, FL 33311

Current Mailing Address:

246 NW 42ND AVE.
1ST FLOOR
MIAMI, FL 33126

New Mailing Address:

2901 W. OAKLAND PARK BLVD
SUITE B20
OAKLAND PARK, FL 33311

FEI Number: 20-4343128

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHECHMAN, LAWRENCE E
246 NW 42ND AVE 1ST FLOOR
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

SCHECHMAN, LAWRENCE E
2901 W. OAKLAND PARK BLVD
SUITE B20
OAKLAND PARK, FL 33311 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:

04/30/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: SCHECHMAN, LAWRENCE E
Address: 2901 W. OAKLAND PARK BLVD. SUITE B20
City-St-Zip: OAKLAND PARK, FL 33311

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: LAWRENCE E SCHECHTMAN

P

04/30/2010

Electronic Signature of Signing Officer or Director

Date