

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000138740

Entity Name: SUNRISE MEDICAL CLINIC, INC.

FILED
Mar 04, 2008
Secretary of State

Current Principal Place of Business:

NATALIYA SONIS
4850 N. SR 7, BLDG. G 116
LAUDERDALE LAKES, FL 33319

Current Mailing Address:

NATALIYA SONIS
4850 N. SR 7, BLDG. G 116
LAUDERDALE LAKES, FL 33319

New Principal Place of Business:

DAVID GLICKMAN, DO
4850 N. SR 7, BLDG. G 106
LAUDERDALE LAKES, FL 33319

New Mailing Address:

DAVID GLICKMAN
4850 N. SR 7, BLDG. G 106
LAUDERDALE LAKES, FL 33319

FEI Number: 43-2114114

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SONIS, NATALIYA
4850 N. SR 7, BLDG. G 116
LAUDERDALE LAKES, FL 33319 US

Name and Address of New Registered Agent:

GLICKMAN, DAVID DO
4850 N. SR 7, BLDG. G 106
LAUDERDALE LAKES, FL 33319 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: DAVID GLICKMAN

03/04/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SONIS, NATALIYA
Address: 4850 N. SR 7, BLDG. G 116
City-St-Zip: LAUDERDALE LAKES, FL 33319

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GLICKMAN, DAVID DO
Address: 4850 N. SR 7, BLDG. G 106
City-St-Zip: LAUDERDALE LAKES, FL 33319

I hereby certify that the information supplied with this filing does not qualify 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: DAVID GLICKMAN

P

03/04/2008

Electronic Signature of Signing Officer or Director

Date