

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000068241

FILED  
Aug 06, 2012  
Secretary of State

**Entity Name:** PHYSICIAN SERVICE ORGANIZATION, INC.

**Current Principal Place of Business:**

9425 SUNSET DRIVE  
SUITE 211  
MIAMI, FL 33173 US

**New Principal Place of Business:**

15105 NW 77 AVENUE  
FOURTH FLOOR  
MIAMI LAKES, FL 33014 US

**Current Mailing Address:**

PO BOX 402566  
MIAMI BEACH, FL 33140

**New Mailing Address:**

15105 NW 77 AVENUE  
FOURTH FLOOR  
MIAMI LAKES, FL 33014 US

FEI Number: 26-0335309

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GARCIA, CARLOS  
299 S.W. 27TH AVENUE  
MIAMI, FL 33135 US

**Name and Address of New Registered Agent:**

KATES, LESTER G  
2655 LEJEUNE ROAD  
804 GABLES INTERNATIONAL PLAZA  
CORAL GABLES, FL 33134 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: LESTER G. KATES

08/06/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: GARCIA, JOSE M  
Address: 15105 NW 77 AVENUE, FOURTH FLOOR  
City-St-Zip: MIAMI LAKES, FL 33014

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: LESTER G. KATES

RA

08/06/2012

Electronic Signature of Signing Officer or Director

Date