

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000109489

FILED
Feb 15, 2012
Secretary of State

Entity Name: QUALITY PHYSICIAN MANAGEMENT, INC.

Current Principal Place of Business:

8600 NW 17TH ST SUITE 160
DORAL, FL 33126

New Principal Place of Business:

8600 NW 17TH ST SUITE 130
DORAL, FL 33126

Current Mailing Address:

8600 NW 17TH ST SUITE 160
DORAL, FL 33126

New Mailing Address:

8600 NW 17TH ST SUITE 130
DORAL, FL 33126

FEI Number: 26-1191274

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

QUEVEDO, MICHAEL A
8600 NW 17TH ST SUITE 160
DORAL, FL 33126 US

Name and Address of New Registered Agent:

QUEVEDO, FELIX A
8600 NW 17TH ST SUITE 130
DORAL, FL 33126 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: FELIX QUEVEDO

02/15/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP
Name: QUEVEDO, MICHAEL A
Address: 8600 NW 17TH ST SUITE 130
City-St-Zip: DORAL, FL 33126

Title: DT
Name: QUEVEDO, MARGARITA H
Address: 8600 NW 17TH ST SUITE 130
City-St-Zip: DORAL, FL 33126

Title: P
Name: QUEVEDO, FELIX
Address: 8600 NW 17 STREET SUITE 130
City-St-Zip: DORAL, FL 33126

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: FELIX QUEVEDO

P

02/15/2012

Electronic Signature of Signing Officer or Director

Date