

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000026810

FILED
Apr 06, 2009
Secretary of State

Entity Name: MARTIN MEDICAL CENTER, INC.

Current Principal Place of Business:

3250 SW 87 AVE SUITE 301
MIAMI, FL 33165

New Principal Place of Business:

3850 SW 87 AVE SUITE 301
MIAMI, FL 33165

Current Mailing Address:

3250 SW 87 AVE SUITE 301
MIAMI, FL 33165

New Mailing Address:

3850 SW 87 AVE SUITE 301
MIAMI, FL 33165

FEI Number: 26-2177641

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEST VISION ACCOUNTING, CORP
3250 SW 87 AVE SUITE 301
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

BEST VISION ACCOUNTING, CORP
3850 SW 87 AVE SUITE 301
MIAMI, FL 33186 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:

04/06/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MARTIN, YAMARIS
Address: 3250 SW 87 AVE SUITE 301
City-St-Zip: MIAMI, FL 33165

Title: DV (X) Delete
Name: MARTIN, YANELIS
Address: 4283 SW 161 PL
City-St-Zip: MIAMI, FL 33185

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: MARTIN, YAMARIS
Address: 4283 SW 161 PL
City-St-Zip: MIAMI, FL 33185

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: YAMARIS MARTIN

DP

04/06/2009

Electronic Signature of Signing Officer or Director

Date