

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000062536

**FILED**  
**Apr 29, 2009**  
**Secretary of State**

**Entity Name:** HEALTH FIRST MEDICAL CENTERS, INC.

**Current Principal Place of Business:**

3604 N.W. 7TH STREET  
THE CC BUILDING  
MIAMI, FL 33125 US

**New Principal Place of Business:**

6401-6411 N. W. 27 AVENUE  
MIAMI, FL 33147 US

**Current Mailing Address:**

3604 N.W. 7TH STREET  
THE CC BUILDING  
MIAMI, FL 33125 US

**New Mailing Address:**

1300 CORAL WAY  
SUITE #204  
MIAMI, FL 33145 US

**FEI Number:** 80-0208180

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CRUZ, LUIS  
3604 N.W. 7TH STREET  
THE CC BUILDING  
MIAMI, FL 33125 US

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

CRUZ, LUIS  
1300 CORAL WAY  
SUITE #204  
MIAMI, FL 33145 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: \_\_\_\_\_

04/29/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: CRUZ, LUIS  
Address: 3604 N.W. 7TH STREET  
City-St-Zip: MIAMI, FL 33125 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: CRUZ, LUIS  
Address: 6401-6411 N. W. 27 AVENUE  
City-St-Zip: MIAMI, FL 33147 US

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: JESSICA GARCIA

DIR

04/29/2009

Electronic Signature of Signing Officer or Director

Date