

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000098682

FILED
Jan 22, 2009
Secretary of State

Entity Name: GOLDEN TOUCH DIAGNOSTIC CENTER, INC.

Current Principal Place of Business:

3306 SW 26TH AVE, BLDG#400
402
OCALA, FL 34474

Current Mailing Address:

3306 SW 26TH AVE, BLDG#400
402
OCALA, FL 34474

New Principal Place of Business:

3306 SW 26TH AVE, BLDG#400
402B
OCALA, FL 34474

New Mailing Address:

3306 SW 26TH AVE, BLDG#400
402B
OCALA, FL 34474

FEI Number: 26-3669966

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MITRA, PRAMILA
2170 SW 37TH ST
OCALA, FL 34474 US

Name and Address of New Registered Agent:

HARGROVE, BILL T RRT
3306 SW 26TH AVE
SUITE 402B
OCALA, FL 34471 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: BILL HARGROVE

01/22/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MITRA, PRAMILA
Address: 2170 SW 37TH ST
City-St-Zip: OCALA, FL 34474

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PART (X) Change () Addition
Name: MITRA, PRAMILA
Address: 3306 SW 26TH AVE
City-St-Zip: OCALA, FL 34471

Title: PART () Change (X) Addition
Name: HARGROVE, BILL T
Address: 3306 SW 26TH AVE
City-St-Zip: OCALA, FL 34471

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: BILL HARGROVE

OWNE

01/22/2009

Electronic Signature of Signing Officer or Director

Date