2012 FOR PROFIT CORPORATION ANNUAL REPORT

Electronic Signature of Registered Agent

DOCUMENT# P09000003363

Entity Name: THE CONDO CLINIC, P.A.

FILED Apr 30, 2012 Secretary of State

Date

New Principal Place of Business:		
New Mailing Address:		
umber Not Applicable () Certificate of Status Desired ()		
Name and Address of New Registered Agent:		
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The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

OFFICERS AND DIRECTORS:

Title:

SIGNATURE:

Name: RUIZ, MARY A

in the State of Florida.

Address: 3400 CORAL WAY, SUITE 400

City-St-Zip: MIAMI, FL 33145

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: MARY ANN RUIZ P 04/30/2012