

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000037715

FILED  
Feb 08, 2010  
Secretary of State

Entity Name: SANTO'S HEALTHCARE CENTER INC

## Current Principal Place of Business:

8313 W. HILLSBOROUGH AVE  
BLD 400 STE 430  
TAMPA, FL 33615

## New Principal Place of Business:

5537 SHELDON RD  
L  
TAMPA, FL 33615

## Current Mailing Address:

8313 W. HILLSBOROUGH AVE  
BLD 400 STE 430  
TAMPA, FL 33615

## New Mailing Address:

5537 SHELDON RD  
L  
TAMPA, FL 33615

FEI Number: 26-4757203

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SANTOS, MAYELIN  
8313 W. HILLSBOROUGH AVE  
BLD 400 STE 430  
TAMPA, FL 33615 US

## Name and Address of New Registered Agent:

SANTOS, MAYELIN  
5537 SHELDON RD  
L  
TAMPA, FL 33615 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: MAYELIN SANTOS

02/08/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P  
Name: SANTOS, MAYELIN  
Address: 5537 SHELDON RD STE L  
City-St-Zip: TAMPA, FL 33615

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: MAYELIN SANTOS

P

02/08/2010

Electronic Signature of Signing Officer or Director

Date