

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000052969

FILED
Feb 22, 2010
Secretary of State

Entity Name: QUIROS AND COHEN MD PA PATHOLOGY

Current Principal Place of Business:

401 N.W 42ND AVENUE
DEPARTMENT OF PATHOLOGY
PLANTATION, FL 33317

New Principal Place of Business:

Current Mailing Address:

401 N.W 42ND AVENUE
DEPARTMENT OF PATHOLOGY
PLANTATION, FL 33317

New Mailing Address:

FEI Number: 59-2236841

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COHEN, SIMON
401 N.W 42ND AVENUE
DEPARTMENT OF PATHOLOGY
PLANTATION, FL 33317 US

Name and Address of New Registered Agent:

COHEN, SIMON M MD
401 N.W 42ND AVENUE
DEPARTMENT OF PATHOLOGY
PLANTATION, FL 33317 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: SIMON M. COHEN, M.D.

02/22/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: COHEN, SIMON M MD
Address: 401 N.W 42ND AVENUE
City-St-Zip: PLANTATION, FL 33317

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: SIMON M. COHEN, M.D.

P

02/22/2010

Electronic Signature of Signing Officer or Director

Date