

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000092100

Entity Name: HEALTH-CHECK, M.D. INC.

FILED
May 04, 2010
Secretary of State

Current Principal Place of Business:

3949 EVANS AV.
403
FORT MYERS, FL 33901 US

New Principal Place of Business:

Current Mailing Address:

3949 EVANS AV.
403
FORT MYERS, FL 33901

New Mailing Address:

PO BOX 07069
FORT MYERS, FL 33919 US

FEI Number: 27-1287439

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PROVENCE, TAMMY
3949 EVANS AV.
403
FORT MYERS, FL 33901 US

Name and Address of New Registered Agent:

PROVENCE, TAMMY
3949 EVANS AVE
#403
FORT MYERS, FL 33901 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: TAMMY PROVENCE

05/04/2010

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES
Name: PROVENCE, TAMMY
Address: PO BOX 07069
City-St-Zip: FORT MYERS, FL 33919 US

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: TAMMY PROVENCE

PRES

05/04/2010

Electronic Signature of Signing Officer or Director

Date