2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 28, 2012
Secretary of State

DOCUMENT# P10000031631

Entity Name: PRO-CARE MEDICAL CENTER INC.

Current Principal Place of Business:

7480 SW 40 STREET
SUITE 740
MIAMI, FL 33155

New Principal Place of Business:

Current Mailing Address:

7480 SW 40 STREET
SUITE 740
MIAMI, FL 33155

New Mailing Address:

FEI Number: 37-1602623 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

REYES, RUBEN D
15363 SW 42 TERR
MIAMI, FL 33185 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P
Name: REYES, RUBEN D
Address: 7480 SW 40 STREET
City-St-Zip: MIAMI, FL 33155

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: RUBEN REYES P 08/28/2012

Electronic Signature of Signing Officer or Director Date