

2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P10000075286

FILED
Jul 06, 2011
Secretary of State

Entity Name: TRI PRO-ACTIVE MEDICAL CENTER, INC.

Current Principal Place of Business:

14471 S. DIXIE HIGHWAY
MIAMI, FL 33176

New Principal Place of Business:

Current Mailing Address:

14471 S. DIXIE HIGHWAY
MIAMI, FL 33176

New Mailing Address:

FEI Number: 27-3459547

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRIS, ELWOOD S
14471 S. DIXIE HIGHWAY
MIAMI, FL 33176 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,D
Name: COLLINS, STEVEN Z
Address: 14471 S. DIXIE HIGHWAY
City-St-Zip: MIAMI, FL 33176 US

Title: VP,D
Name: HARRIS, ELWOOD S
Address: 14471 SOUTH DIXIE HIGHWAY
City-St-Zip: MIAMI, FL 33176

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: STEVEN Z. COLLINS

PRES

07/06/2011

Electronic Signature of Signing Officer or Director

Date