2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2011
Secretary of State

DOCUMENT# P10000103514

Entity Name: INTERNAL MEDICINE - COMPLETE CARE, P.A.

Current Principal Place of Business:

4636 S. 25TH STREET
FT PIERCE, FL 34981

New Principal Place of Business:

Current Mailing Address:

4636 S. 25TH STREET
FT. PIERCE, FL 34981

New Mailing Address:

FEI Number: 27-4373223 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SIJERCIC, ZLATKO D
5645 SW LONGSPUR LANE
PALM CITY, FL 34990 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: SIJERCIC, BOZANA M.D.
Address: 4636 S. 25TH STREET
City-St-Zip: FT PIERCE, FL 34981

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: BOZANA SIJERCIC P 01/27/2011

Electronic Signature of Signing Officer or Director Date