2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2012
Secretary of State

DOCUMENT# P11000016635

Entity Name: BLUE VILLAGE MEDICAL CENTER CORP

Current Principal Place of Business:

2669 FOREST HILL BLVD
SUITE 211
WEST PALM BEACH, FL 33406

New Principal Place of Business:

Current Mailing Address:

2669 FOREST HILL BLVD
SUITE 211
WEST PALM BEACH, FL 33406

New Mailing Address:

FEI Number: 27-5078582 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ORTIZ JACOBO, JOSE A
4262 NW 5 STREET
3
MIAMI, FL 33126 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: ORTIZ JACOBO, JOSE A
Address: 4262 NW 5 STREET APT 3
City-St-Zip: MIAMI, FL 33126

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: JOSE A. ORTIZ PRES 01/24/2012
Electronic Signature of Signing Officer or Director Date