

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000093469

FILED
Mar 04, 2012
Secretary of State

Entity Name: CALIXTE MEDICAL CENTER INC.

Current Principal Place of Business:

8910 MIRAMAR PARKWAY.
117
MIRAMAR, FL 33025 US

New Principal Place of Business:

Current Mailing Address:

6729 CAMELIA DR.
MIRAMAR, FL 33023 US

New Mailing Address:

FEI Number: 30-0705258

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CALIXTE, HAROLD
6729 CAMELIA DR
MIRAMAR, FL 33023 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: CALIXTE, HAROLD
Address: 6729 CAMELIA DR
City-St-Zip: MIRAMAR, FL 33023

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: HAROLD CALIXTE

P

03/04/2012

Electronic Signature of Signing Officer or Director

Date