

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000039127

Entity Name: SOUTH BEACHES MEDICAL, INC.

FILED
Apr 01, 2009
Secretary of State

Current Principal Place of Business:

113 N. LAKE GEORGE DRIVE
GEORGETOWN, FL 32139

New Principal Place of Business:

Current Mailing Address:

113 N. LAKE GEORGE DR.
GEORGETOWN, FL 32139

New Mailing Address:

FEI Number: 59-3327159

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KILIS, KATHY
113 N. LAKE GEORGE DR.
GEORGETOWN, FL 321393107 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: KILIS, KATHY
Address: 113 N. LAKE GEORGE DR.
City-St-Zip: GEORGETOWN, FL 321393107

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: KATHY KILIS

PS

04/01/2009

Electronic Signature of Signing Officer or Director

Date