2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000012845

City-St-Zip:

MIAMI SHORES, FL 33138

Entity Name: J & F COMMUNITY MEDICAL CENTER, INC.

FILED Jun 05, 2008 Secretary of State

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
8661 NE 2ND AVE EL PORTAL, FL 33138	US			
Current Mailing Address:		New Mailing Address:		
8661 NE 2ND AVE EL PORTAL, FL 33138	US			
FEI Number: 65-0416541	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:			f New Registered Agent:	
CRISOLOGO, FLOR DE 797 NE 94 ST MIAMI SHORES, FL 331				
The above named entity in the State of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATURE:				
Electronic Signature of Registered Agent		ent	Date	
	3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
•) Delete FLOR DE MARIA	Title: Name: Address:	() Change () Addition	

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: FLOR CRISOLOGO PR 06/05/2008