

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000083155

**FILED**  
**Jan 08, 2012**  
**Secretary of State**

**Entity Name:** ONCOLOGY CONSULTING SERVICES, INC.

**Current Principal Place of Business:**

670 NW 101 TERRACE  
PLANTATION, FL 33324 US

**New Principal Place of Business:**

**Current Mailing Address:**

670 NW 101ST TERRACE  
PLANTATION, FL 33324 US

**New Mailing Address:**

670 NW 101 TERRACE  
PLANTATION, FL 33324 US

**FEI Number:** 65-0533447

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FISHMAN, MARC L PRES  
670 NW 101ST TERRACE  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

FISHMAN, MARC L PRES  
670 NW 101 TERRACE  
PLANTATION, FL 33324 US

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: MARC L. FISHMAN

01/08/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: FISHMAN, MARC  
Address: 670 NW 101 TERRACE  
City-St-Zip: PLANTATION, FL 33324 US

Title: ST  
Name: DOSORETZ, DANIEL  
Address: 13221 PONDEROSA WAY  
City-St-Zip: CAPE CORAL, FL 33907 US

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: MARC L. FISHMAN

PRES

01/08/2012

Electronic Signature of Signing Officer or Director

Date