

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000060984

**FILED**  
**Jan 09, 2006**  
**Secretary of State**

**Entity Name:** ROYAL PALM HEALTH CENTER, INC.

**Current Principal Place of Business:**

9845 SW 40 ST  
MIAMI, FL 331653993 US

**New Principal Place of Business:**

**Current Mailing Address:**

9845 SW 40 ST  
STE #316  
MIAMI, FL 331653993 US

**New Mailing Address:**

9845 SW 40 ST  
MIAMI, FL 331653993 US

**FEI Number:** 65-0601014

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LLANES, FRANKLIN A  
11880 SW 40TH STREET  
STE #316  
MIAMI, FL 33175 US

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

LLANES, FRANKLIN A MD  
9845 SW 40 ST  
MIAMI, FL 331653993 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: FRANKLIN A LLANES, MD

01/09/2006

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: LLANES, FRANKLIN A  
Address: 11880 SW 40TH STREET #316  
City-St-Zip: MIAMI, FL 33175 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: LLANES, FRANKLIN A MD  
Address: 9845 SW 40 ST  
City-St-Zip: MIAMI, FL 331653993 US

I hereby certify that the information supplied with this filing does not qualify for the 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: FRANKLIN A LLANES, MD

PRES

01/09/2006

Electronic Signature of Signing Officer or Director

Date