

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000073118

FILED
Apr 14, 2011
Secretary of State

Entity Name: MEDICAL INTERVENTIONS OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

265 W. STATE RD 50
CLERMONT, FL 34711 US

New Principal Place of Business:

265 WEST STATE RD 50
CLERMONT, FL 34711 US

Current Mailing Address:

265 W. STATE RD 50
CLERMONT, FL 34711 US

New Mailing Address:

265 WEST STATE RD 50
CLERMONT, FL 34711 US

FEI Number: 59-3336115

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, JAIME C
265 W. STATE RD 50
CLERMONT, FL 34711 US

Name and Address of New Registered Agent:

GONZALEZ, JAIME C
265 WEST STATE RD 50
CLERMONT, FL 34711 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: JAMIE C. GONZALEZ

04/14/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: GONZALEZ, JAIME C
Address: 265 WEST STATE RD 50
City-St-Zip: CLERMONT, FL 34711

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: JAMIE C. GONZALEZ

PD

04/14/2011

Electronic Signature of Signing Officer or Director

Date