

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000012256

FILED
Apr 23, 2009
Secretary of State

Entity Name: PRI-MED HEALTH CARE, P.A.

Current Principal Place of Business:

804 N ROSE AVENUE
KISSIMMEE, FL 34741 US

New Principal Place of Business:

302 W BASS STREET
KISSIMMEE, FL 34741 US

Current Mailing Address:

804 N ROSE AVENUE
KISSIMMEE, FL 34741 US

New Mailing Address:

302 W BASS STREET
KISSIMMEE, FL 34741 US

FEI Number: 59-3364426

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JIMENEZ, RAFAEL M.D.
804 N ROSE AVENUE
KISSIMMEE, FL 34741 US

Name and Address of New Registered Agent:

JIMENEZ, RAFAEL M.D.
302 W BASS STREET
KISSIMMEE, FL 34741 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: RAFAEL JIMENEZ MD

04/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JIMENEZ, RAFAEL M.D.
Address: 804 N ROSE AVENUE
City-St-Zip: KISSIMMEE, FL 34741

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JIMENEZ, RAFAEL M.D.
Address: 302 W BASS STREET
City-St-Zip: KISSIMMEE, FL 34741

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: RAFAEL JIMENEZ MD

D

04/23/2009

Electronic Signature of Signing Officer or Director

Date