

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000022864

**FILED**  
**Mar 25, 2012**  
**Secretary of State**

**Entity Name:** FROSCH MEDICAL CONSULTANTS, INC.

**Current Principal Place of Business:**

9633 WEST BROWARD BLVD.  
SUITE 8  
PLANTATION, FL 33324

**New Principal Place of Business:**

**Current Mailing Address:**

11612 NW 5TH STREET  
PLANTATION, FL 33325

**New Mailing Address:**

**FEI Number:** 65-0667291

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROSENTHAL, STEVEN R  
2405 UNIVERSITY DRIVE  
CORAL SPRINGS, FL 33065 US

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

FROSCH, BENJAMIN  
9633 W. BROWARD BLVD.  
8  
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: BENJAMIN FROSCH

03/25/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: FROSCH, BENJAMIN L  
Address: 11612 NW 5TH STREET  
City-St-Zip: PLANTATION, FL 33325

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: BENJAMIN FROSCH

PRES

03/25/2012

Electronic Signature of Signing Officer or Director

Date