

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000034479

Entity Name: RALPH CLINIC CENTER, INC.

Current Principal Place of Business:

7233 CORAL WAY
MIAMI, FL 33155

Current Mailing Address:

7233 CORAL WAY
MIAMI, FL 33155 US

FEI Number: 26-4708452

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PADRON, FRANCISCO MD
3128 CORAL WAY
MIAMI, FL 33145 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PSD
Name PADRON, FRANCISCO MD
Address 7233 CORAL WAY
City-State-Zip: MIAMI FL 33155

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: FRANCISCO PADRON

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05/01/2013

Electronic Signature of Signing Officer/Director Detail

Date