

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000088142

Entity Name: PREMIUM QUALITY MEDICAL CENTER CORP

Current Principal Place of Business:

701 NW 57TH AVE
SUITE 260
MIAMI, FL 33126

Current Mailing Address:

701 NW 57TH AVE
SUITE 260
MIAMI, FL 33126 US

FEI Number: 36-4661684

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PUENTES, ULISES
701 NW 57TH AVE
SUITE 260
MIAMI, FL 33126 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 PD
Name PUENTES, ULISES
Address 701 NW 57TH AVE
SUITE 260
City-State-Zip: MIAMI FL 33126

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: ULISES PUENTES

PD

02/25/2014

Electronic Signature of Signing Officer/Director Detail

Date