

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000063704

Entity Name: DIRECT HELPERS MEDICAL CENTER, INC.

Current Principal Place of Business:

425 WEST 51 PLACE
HIALEAH, FL 33012

Current Mailing Address:

425 WEST 51 PLACE
HIALEAH, FL 33012 US

FEI Number: 27-3185827

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOSA, NIEVES M
425 WEST 51 PLACE
HIALEAH, FL 33012 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 P
Name LOSA, NIEVES M
Address 425 WEST 51 PLACE
City-State-Zip: HIALEAH FL 33012

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: NIEVES M LOSA

PRESIDENT

01/10/2014

Electronic Signature of Signing Officer/Director Detail

Date