DEERFIEI	LD BEACH, FL 33442			
FEI Number: 90-0819584			Certificate of Status Desired: No	
Name and	d Address of Current Registered Agent:			
	O R DR. T HILLSBORO BLVD. BEACH, FL 33442 US			
	med entity submits this statement for the purpose of changi	ng its registered office or re	gistered agent, or both, in the State of	Florida.
The above na	med entity submits this statement for the purpose of changi RE: LEO R. MINSKY	ng its registered office or re	gistered agent, or both, in the State of	Florida. 04/16/2013
The above na		ng its registered office or re	egistered agent, or both, in the State of	
The above nai	RE: LEO R. MINSKY	ng its registered office or re	gistered agent, or both, in the State of	04/16/2013
The above nai	RE: LEO R. MINSKY Electronic Signature of Registered Agent	ng its registered office or re	rgistered agent, or both, in the State of	04/16/2013
The above nai SIGNATU Officer/Di	RE: LEO R. MINSKY Electronic Signature of Registered Agent			04/16/2013

City-State-Zip: DEERFIELD BEACH FL 33442

1861 WEST HILLSBORO BLVD DEERFIELD BEACH. FL 33442

Current Mailing Address:

1861 WEST HILLSBORO BLVD DI

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City-State-Zip: DEERFIELD BEACH FL 33442

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: LEO R. MINSKY

Electronic Signature of Signing Officer/Director Detail

VP

Date

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000035231

Entity Name: THE HEALTH CENTER INC.

Current Principal Place of Business: