2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2007
Secretary of State

DOCUMENT# N04000001611

Entity Name: ANGEL'S PEDIATRIC CARDIOLOGY, INC.

Current Principal Place of Business:

2257 LYNX AVENUE
DAVIE, FL 33324

New Principal Place of Business:

Current Mailing Address:

151 N. NOB HILL ROAD, #139
PLANTATION, FL 33324

New Mailing Address:

FEI Number: 68-0579881 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PEREZ, SONIA
2257 LYNX AVE
DAVIE, FL 33324 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: PEREZ, SONIA I
Address: 2257 LYNX AVE
City-St-Zip: DAVIE, FL 33324

Title: D ( ) Delete
Name: ABRAMSON, SYLVIE
Address: 716 NW 100 TERR
City-St-Zip: PLANTATION, FL 33324

Title: D ( ) Delete
Name: MELAMED, ELLIOT
Address: 12460 WEST ATLANTIC BLVD
City-St-Zip: CORAL SPRINGS, FL 33071

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SONIA PEREZ D 03/27/2007

Electronic Signature of Signing Officer or Director — Date