

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000109026

FILED
Jan 08, 2007
Secretary of State

Entity Name: PMN MEDICAL CENTERS, INC.

Current Principal Place of Business:

701 NW 57 AVE
110
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

701 NW 57 AVE
110
MIAMI, FL 33126

New Mailing Address:

FEI Number: 43-1976626 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MEDVIN, PHILIP ESQ
2801 PONCE DE LEON BLVD STE 370
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

MEDVIN, PHILIP ESQ
4112 AURORA ST.
CORAL GABLES, FL 33146 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: _____ 01/08/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: BEHAR, VICTOR
Address: 701 NW 57 AVENUE, S-110
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VICTOR BEHAR CEO 01/08/2007
Electronic Signature of Signing Officer or Director Date