

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000014467

Entity Name: MEGA MEDICAL CENTER, INC.

FILED
Jun 08, 2006
Secretary of State

Current Principal Place of Business:

9337 S.W. 40 STREET
MIAMI, FL 33165

New Principal Place of Business:

293 S.W. 27 AVENUE
MIAMI, FL 33135

Current Mailing Address:

9337 S.W. 40 STREET
MIAMI, FL 33165

New Mailing Address:

293 S.W. 27 AVENUE
MIAMI, FL 33135

FEI Number: 20-2263082

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANZ, MICHAEL
9337 S.W. 40 STREET
MIAMI, FL 33165 US

Name and Address of New Registered Agent:

SANZ, MICHAEL
293 S.W. 27 AVENUE
MIAMI, FL 33135 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

06/08/2006

Date

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: SANZ, MICHAEL
Address: 9337 S.W. 40 STREET
City-St-Zip: MIAMI, FL 33165

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: SANZ, MICHAEL
Address: 293 S.W. 27 AVENUE
City-St-Zip: MIAMI, FL 33135

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: MICHAEL SANZ

Electronic Signature of Signing Officer or Director

P

06/08/2006

Date