2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000016159

Entity Name: MEDICAL CONSULTING CENTER, INC.

FILED Jun 04, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3383 NW 7 ST 3240 NW 7TH ST MIAMI, FL 33125 109

MIAMI, FL 33125

New Mailing Address: Current Mailing Address:

3383 NW 7 ST 3240 NW 7TH ST MIAMI, FL 33125 109 MIAMI, FL 33125

FEI Number: 20-5053886 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MOREIRA, MASIEL MOREIRA, MASIEL 3383 NW 7 ST 3240 NW 7TH ST 109 US MIAMI, FL 33125 MIAMI, FL 33125 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: MASIEL MOREIRA 06/04/2009

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

MOREIRA, MASIEL MOREIRA, MASIEL Name: Name: 3383 NW 7 ST #109 3240 NW 7TH ST Address: Address: City-St-Zip: MIAMI, FL 33125 City-St-Zip: MIAMI, FL 33125

I hereby certify that the information supplied with this filing does not qualify 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.

Ρ SIGNATURE: MASIEL MOREIRA 06/04/2009