

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000073152

FILED
Feb 05, 2008
Secretary of State

Entity Name: ALY MEDICAL CENTER CORP.

Current Principal Place of Business:

2140 W FLAGLER ST
STE 202
MIAMI, FL 33135

New Principal Place of Business:

Current Mailing Address:

2140 W FLAGLER ST
STE 202
MIAMI, FL 33135

New Mailing Address:

FEI Number: 26-0417789 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAMIREZ, ROSARIO
3855 SW 153 CT
MIAMI, FL 33185 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RAMIREZ, ROSARIO
Address: 3855 SW 153 CT
City-St-Zip: MIAMI, FL 33185

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MARCIAL, DANNY D
Address: 669 NW 124 CT
City-St-Zip: MIAMI, FL 33182

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.

SIGNATURE: DANNY D MARCIAL

PD

02/05/2008

Electronic Signature of Signing Officer or Director

Date