

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Jul 22, 2009
Secretary of State**

DOCUMENT# P94000077575

Entity Name: MED-TECH RESOURCES, INC.

Current Principal Place of Business:

5703 NW 35TH AVE.
MIAMI, FL 33142

New Principal Place of Business:

3777 NE 163RD STREET
#112
NORTH MIAMI BEACH, FL 33160 US

Current Mailing Address:

5703 NW 35TH AVE.
MIAMI, FL 33142

New Mailing Address:

3777 NE 163RD STREET
#112
NORTH MIAMI BEACH, FL 33160 US

FEI Number: 65-0529593 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE LAW OFFICES OF CRAIG M DORNE,P.A.
407 LINCOLN RD.
PENTHOUSE SOUTHEAST
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

CRAIG M DORNE,P.A.
407 LINCOLN RD.
PENTHOUSE SOUTHEAST
MIAMI BEACH, FL 33139 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: CRAIG DORNE

07/22/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: ESQUENAZI, ALBERT
Address: 5703 NW 35TH AVE.
City-St-Zip: MIAMI, FL 33142

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: ESQUENAZI, ALBERT
Address: 3777 NE 163RD STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33160

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: ALBERT ESQUENAZI

P

07/22/2009

Electronic Signature of Signing Officer or Director

Date