

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# V40232

FILED  
Apr 15, 2003  
Secretary of State

Entity Name: NEURO CARDIAC, INC.

**Current Principal Place of Business:**

5822 SW 8TH ST  
MIAMI, FL 33144 US

**New Principal Place of Business:**

**Current Mailing Address:**

5822 SW 8TH ST  
MIAMI, FL 33144 US

**New Mailing Address:**

FEI Number: 65-0339816      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PENA, HECTOR  
225 NW 59 CT.  
MIAMI, FL 33126 US

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

PENA, HECTOR A  
225 NW 59 CT.  
MIAMI, FL 33126 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: HECTOR A PENA      04/15/2003  
Electronic Signature of Registered Agent      Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSD ( ) Delete  
Name: PENA, HECTOR A  
Address: 225 NW 59 CT  
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 Section 119.07(3)(i), 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: HECTOR A PENA      PSD      04/15/2003  
Electronic Signature of Signing Officer or Director      Date