

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000005437

Entity Name: DADE MEDICAL GROUP INC.

Current Principal Place of Business:

782 NW 42 AVE STE 439
MIAMI, FL 33126

Current Mailing Address:

782 NW 42 AVE STE 439
MIAMI, FL 33126

FEI Number: 30-0527842

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VITAL, MARIA
7171 CORAL WAY, STE 517
MIAMI, FL 33155 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

_____ Date

Officer/Director Detail :

Title PD
Name VITAL, MARIA C
Address 7171 CORAL WAY, STE 517
City-State-Zip: MIAMI FL 33155

I hereby 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 all other like empowered.

SIGNATURE: MARIA C VITAL

PRESIDENT

01/14/2013

Electronic Signature of Signing Officer/Director Detail

Date