

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000066782

Entity Name: NEW LIFE MEDICAL INSTITUTE, INC.

Current Principal Place of Business:

861 SW 8TH STREET
MIAMI, FL 33130

Current Mailing Address:

861 SW 8TH STREET
MIAMI, FL 33130 US

FEI Number: 65-0519630

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

RODRIGUEZ, ERNESTO
10820 SW 171 STREET
MIAMI, FL 33157 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 PVT
Name RODRIGUEZ, ERNESTO
Address 10820 SW 171 STREET
City-State-Zip: MIAMI FL 33157

Title VP
Name KUAN, IDELFONSO
Address 861 SW 8TH STREET
City-State-Zip: MIAMI FL 33130

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: RODRIGUEZ , ERNESTO

PVT

03/31/2016

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date