2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#732950

FILED Jan 03, 2008 Secretary of State

Entity Name: MIAMI SOCIETY OF PLASTIC SURGEONS, INC.

Current Principal Place of Business: New Principal Place of Business:

9100 S DADELAND BLVD - SUITE 502 MIAMI, FL 331567815

Current Mailing Address: New Mailing Address:

9100 S DADELAND BLVD - SUITE 502 MIAMI, FL 331567815

FEI Number: 59-1670308 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FRESHWATER, M FELIX M.D. 9100 S DADELAND BLVD - SUITE 502 MIAMI, FL 331567815 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:

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Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: DE LA PEDRAJA, JORGE MD Name: PANTHAKI, ZUBIN J MD

Address: 2645 DOUGLAS ROAD, SUITE 101 Address: 1611 NW 12TH AVENUE - ET 3019

City-St-Zip: MIAMI, FL 33133 City-St-Zip: MIAMI, FL 331361005 US

Name: PANTHAKI, ZUBIN MD Name: PAZMINO, PAT MD

Address: 1611 N.W. 12TH AVE.,#3019,ACC EAST BLDG. Address: 21355 E DIXIE HIGHWAY - SUITE 108
City-St-Zip: MIAMI, FL 331101 City-St-Zip: AVENTURA, FL 331801239 US

 Title:
 S/T
 () Delete
 Title:
 S/T
 (X) Change () Addition

 Name:
 PAZMINO, PAT MD
 Name:
 FRESHWATER, M FELIX MD

 Address:
 21355 EAST DIXIE HIGHWAY, SUITE 108
 Address:
 9100 S DADELAND BLVD - SUITE 502

City-St-Zip: AVENTURA, FL 33180 City-St-Zip: MIAMI, FL 331567815 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: M FELIX FRESHWATER MD S 01/03/2008