2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G29614

FILED Jul 15, 2008 Secretary of State

Entity Name: MEDICAL EXPLORATORY CORPORATION INC

Entity Nam	IE: MEDICAL	EXPLORATORY CORPORA	ION INC.		
Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
2991 CORA MIAMI, FL	AL WAY 33145				
Current Mailing Address:			New Mailing Add	New Mailing Address:	
2149 SW 30TH COURT MIAMI, FL 33145			2980 SW 21 TERR MIAMI, FL 33145	2980 SW 21 TERRACE MIAMI, FL 33145	
FEI Number:	59-2277504	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Addres	s of New Registered Agent:	
D'AMICO, DAVID M 2149 SW 30TH COURT MIAMI, FL 33145 US				GOLDSTEIN, SOLOMON 2980 SW 21 TERRACE MIAMI, FL 33145 US	
The above in the State		ubmits this statement for the p	urpose of changing its regist	ered office or registered agent, or both,	
SIGNATURE: SOLOMON GOLDSTEIN				07/15/2008	
	Electroni	c Signature of Registered Age	nt	Date	
		(2)(b), F.S., the corporation did no Trust Fund Contribution ().	t receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHAI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () CAMPBELL, JOH 2991 CORAL WA MIAMI, FL 3314	AY Y	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () KENT, MICHAEL 2149 SW 30TH (MIAMI, FL 3314	COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () CAMPBELL, JOH 2991 CORAL WA MIAMI, FL 3313	AY	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	S () D'AMICO, DAVIE 2149 SW 30TH (MIAMI, FL 3314			(X) Change () Addition ELL, JOHN DRAL WAY FL 33145 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN CAMPBELL P 07/15/2008