2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H08825

in the State of Florida.

Entity Name: ARNEL MEDICAL OFFICE, INC.

FILED Apr 24, 2006 Secretary of State

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

8150 SOUTHWEST 8TH STREET, SUITE 226 8150 SW 8TH ST, SUITE 226

MIAMI, FL 33144 MIAMI, FL 33144

Current Mailing Address: New Mailing Address:

8150 SOUTHWEST 8TH STREET, SUITE 226 8150 SW 8TH ST, SUITE 226

MIAMI, FL 33144 MIAMI, FL 33144

FEI Number: 59-2450872 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:

MANUEL LOPEZ, ESQ.

122 MINORCA AVENUE

CORAL GABLES, FL 33134 US

FALCON, ROBERTO

8150 SW 8TH ST SUITE 226

MIAMI, FL 33144 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

SIGNATURE: ROBERTO FALCON 04/24/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD () Delete Title: PTD (X) Change () Addition Name: FALCON, ROBERTO Name: FALCON, ROBERTO

 Address:
 8650 SW 8 ST. #226
 Address:
 8150 SW 8 ST. #226

 City-St-Zip:
 MIAMI, FL 33144
 City-St-Zip:
 MIAMI, FL 33144

Title: VPSD () Delete Title: () Change () Addition
Name: MORALES ANTONIO Name:

 Name:
 MORALES, ANTONIO
 Name:

 Address:
 8150 SW 8 ST. #226
 Address:

 City-St-Zip:
 MIAMI, FL 33144
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERTO FALCON PTD 04/24/2006