2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED DOCUMENT # L84840 Jul 18, 2008 08:00 AM Secretary of State 1. Entity Name R & D MEDICAL SERVICES, P.A. Principal Place of Business Mailing Address 1006 W. PLEASANT ST 1006 W. PLEASANT ST AVON PARK, FL 33825 US AVON PARK, FL 33825 No Chg-P CR2E034 (11/05) 07142008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3017718 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GELDART, DONALD B MD DO NOT WRITE 1006 W. PLEASANT ST AVON PARK, FL 33825 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$550.00 Trust Fund Contribution. U00000955590 Added to Fees Due by September 12, 2008 07/18/08--90004-001 OFFICERS AND DIRECTORS 10. TITLE NAME GELDART, DONALD B. STREET ADDRESS 1006 W PLEASANT ST AVON PARK, FL 33825 CITY-S1-ZIP TITLE NAME STREET ADDRESS CtTY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 in changed, or on a attachment with all block in the empowered. of the corporation or the receiver or changed, or on an attachment with

ME OF SIGNING OFFICER OR DIRECTOR