2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2005
Secretary of State

DOCUMENT# L96363

Entity Name: MEDERI OF HILLSBOROUGH COUNTY, INC.

Current Principal Place of Business:

P. O. BOX 144536
CORAL GABLES, FL 331141536

New Principal Place of Business:

P. O. BOX 144536
CORAL GABLES, FL 331141536 US

Current Mailing Address:

153 SEVILLA AVENUE
CORAL GABLES, FL 33134 US

New Mailing Address:

FEI Number: 65-0215833 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

M.J.F. REGISTERED AGENT CORP.
153 SEVILLA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: STD ( ) Delete
Name: NESSLEIN, DAVID,
Address: PO BOX 144536
City-St-Zip: CORAL GABLES, FL 331144536

Title: PD ( ) Delete
Name: VAZQUEZ, SANDRA,
Address: PO BOX 144536
City-St-Zip: CORAL GABLES, FL 331144536

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD (X) Change ( ) Addition
Name: NESSLEIN, DAVID,
Address: PO BOX 144536
City-St-Zip: CORAL GABLES, FL 331144536 US

Title: PD (X) Change ( ) Addition
Name: VAZQUEZ, SANDRA,
Address: PO BOX 144536
City-St-Zip: CORAL GABLES, FL 331144536 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DAVID NESSLEIN STD 03/01/2005

Electronic Signature of Signing Officer or Director — Date