2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M37805

FILED Apr 29, 2008 Secretary of State

Entity Name: ABATE MEDICAL EMERGENCIES NOW, INC.

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

8300 W FLAGLER #175 8300 W FLAGLER ST, MIAMI, FL 33144 SUITE 175

MIAMI, FL 33144

Current Mailing Address: New Mailing Address:

8300 W FLAGLER #175 8300 W FLAGLER ST MIAMI, FL 33144 SUITE 175 MIAMI, FL 33144

FEI Number: 59-2718514 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:

LORA, FERNANDO 7200 S.W. 146TH TERR MIAMI, FL 33158 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT () Delete Title: PT (X) Change () Addition

 Name:
 LORA, FERNANDO
 Name:
 LORA, FERNANDO

 Address:
 7200 S.W. 146TH TERR
 Address:
 7200 S.W. 146TH TERR

City-St-Zip: MIAMI, FL City-St-Zip: MIAMI, FL 33158

 Name:
 LORA, NEREIDA P
 Name:
 LORA, NEREIDA P

 Address:
 7200 S.W. 146TH TERR
 Address:
 7200 S.W. 146TH TERR

 City-St-Zip:
 MIAMI, FL
 33158

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: FERNANDO LORA, MD PRES 04/29/2008