2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000003900

FILED Nov 28, 2007 Secretary of State

Entity Name: LA HERMOSA COMMUNITY HEALTH CENTER, INC.

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

19205 SW 185 CT 9507 SW 160TH STREET 280

MIAMI, FL 33187

MIAMI, FL 33157

Current Mailing Address: New Mailing Address:

19205 SW 185 CT MIAMI, FL 33187

FEI Number: 48-1258289 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FABIO, HERBERT FABIO, HERBERT 9507 SW 160TH STREET 11115 SW 134TH COURT MIAMI, FL 33186 280

MIAMI, FL 33157 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: HERBERT FABIO 11/28/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PD (X) Change () Addition () Delete CANAAN, YAMIL CANAAN, YAMIL Name: Name:

7542 SW 157 PL Address: 531 E 25TH STREET Address: City-St-Zip: MIAMI, FL 33193 City-St-Zip: HIALEAH, FL 33013

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

ZORRILLA, JONATHAN Name: SABILLON, EDUARDO Name: Address: 19205 SW 185TH COURT Address: 7330 SW 9TH STREET City-St-Zip: MIAMI, FL 33187 City-St-Zip: MIAMI, FL 33144

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

FABIO, HERBERT Name: FABIO, HERBERT Name: 11115 SW 134TH COURT 8340 SW 166TH STREET Address: Address: City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33157

() Change () Addition

Title: (X) Delete Title: Name: SABILLON, EDUARDO Name: 7330 SW 9TH STREET Address: Address: City-St-Zip: MIAMI, FL 33144 City-St-Zip:

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

GORDON, VANESSA Name: Name: 15832 SW 57 TERRACE Address: Address: City-St-Zip: MIAMI, FL 33185 City-St-Zip:

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

EAGEN-ZORRILLA, CINDY Name: Name: Address: 19205 SW 185TH COURT Address: MIAMI, FL 33187 City-St-Zip: City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: YAMIL CANAAN PD 11/28/2007

Electronic Signature of Signing Officer or Director

Date