2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39054

Apr 29, 2011 Secretary of State

Entity Name: PALM MEDICAL GROUP, INC.

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

7240 SW 58 ST. 9100 S DADELAND BLVD MIAMI, FL 33143 US

STE 1500

MIAMI, FL 33156

Current Mailing Address: New Mailing Address:

9100 S DADELAND BLVD 7240 SW 58 ST MIAMI, FL 33143 US STE 1500

MIAMI, FL 33156 US

FEI Number: 65-0305028 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:

> IGLESIAS, MANUEL E 9100 S DÁDELAND BLVD STE 1500 MIAMI, FL 33156 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: MANUEL E IGLESIAS 04/29/2011

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ROSENKRANTZ, CARL Name: Address: 5352 LINTON BLVD. City-St-Zip: DELRAY BEACH, FL 33484

Title:

Name: SCHNEIDER, ALAN Address: 5607 NORTH DIXIE HWY. City-St-Zip: FT. LAUDERDALE, FL 33169

Title:

KOTZEN, STEPHEN Name: 16800 NW 2 AVE., #202 Address: City-St-Zip: N. MIAMI BEACH, FL 33159

Title:

Name: SILBERT, ALAN M 952A NE 2ND AVE Address: City-St-Zip: MIAMI, FL 33138

Title:

GOLDSTEIN, MITCHELLE Name: 9910 SANDLEFOOT BLVD., #1 Address: City-St-Zip: BOCA RATON, FL 33423

Title:

IGLESIAS, MANUEL E Name:

Address: 9100 S DADELAND BLVD, SUITE 1500

MIAMI, FL 33156 City-St-Zip:

I hereby 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 all other like empowered.

SIGNATURE: LACY LOAR S 04/29/2011