

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000083326

FILED
Jan 08, 2007
Secretary of State

Entity Name: MEDICAL ESCROW CONSULTANTS, INC.

Current Principal Place of Business:

601 N. NEW YORK AVE.
#201
WINTER PARK, FL 32789 US

New Principal Place of Business:

Current Mailing Address:

601 N. NEW YORK AVE.
#201
WINTER PARK, FL 32789 US

New Mailing Address:

POST OFFICE BOX 2066
WINTER PARK, FL 32790 US

FEI Number: 59-3040150 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALTSMAN, ROBERT P
222 S. PENNSYLVANIA AVE., STE. 200
WINTER PARK, FL 32789 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: ROBERT P SALTSMAN

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: BARKETT, R
Address: 601 N NEW YORK AVENUE STE 201
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: RUSSELL BARKETT

VP

01/08/2007

Electronic Signature of Signing Officer or Director

Date