

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000064868

Entity Name: MYOTONICA ASSOCIATES, INC.

FILED
Jul 27, 2005
Secretary of State

Current Principal Place of Business:

911 SW 8TH AVE
MIAMI, FL 33174

New Principal Place of Business:

Current Mailing Address:

911 SW 87TH AVE.
MIAMI, FL 33174

New Mailing Address:

FEI Number: 61-1419758

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIEZ LILIAN J.
911 SW 87TH AVE.
MIAMI, FL 33174 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

OFFICERS AND DIRECTORS:

Title: VD (X) Delete
Name: RAMOS, LOURDES C
Address: 911 SW 87TH AVE.
City-St-Zip: MIAMI, FL 33174

Title: PD () Delete
Name: DIEZ, LILIAN J
Address: 911 SW 87TH AVE.
City-St-Zip: MIAMI, FL 33174

Title: D (X) Delete
Name: GIL, DEVORA N
Address: 911 S.W. 87TH AVE
City-St-Zip: MIAMI, FL 33174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: LILIAN J. DIEZ

PD

07/27/2005

Electronic Signature of Signing Officer or Director

Date