

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000000129

Entity Name: MEDIRECT LATINO INC.

FILED
Jul 19, 2007
Secretary of State

Current Principal Place of Business:

2101 WEST ATLANTIC BOULEVARD
SUITE 101
POMPANO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

2101 WEST ATLANTIC BOULEVARD
SUITE 101
POMPANO BEACH, FL 33069

New Mailing Address:

FEI Number: 20-1327083

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWICKLE & SWICKLE, PA
STEVEN M. SWICKLE, ESQ.
633 S. ANDREWS AVE STE #201
FORT LAUDERDALE, FL 33316 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: D () Delete
Name: HANSEN, CHARLES III
Address: 2101 W. ATLANTIC BLVD, SUITE 101
City-St-Zip: POMPANO BEACH, FL 33069

Title: PTD () Delete
Name: LEGATES, JAMES L
Address: 2101 W. ATLANTIC BLVD, SUITE 101
City-St-Zip: POMPANO BEACH, FL 33069

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CSD (X) Change () Addition
Name: HANSEN, CHARLES W III
Address: 2101 W. ATLANTIC BLVD, SUITE 101
City-St-Zip: POMPANO BEACH, FL 33069

Title: VPT (X) Change () Addition
Name: LEGATES, JAMES L
Address: 2101 W. ATLANTIC BLVD, SUITE 101
City-St-Zip: POMPANO BEACH, FL 33069

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: JACQUELYN GOGIN

MS.

07/19/2007

Electronic Signature of Signing Officer or Director

Date