

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000018252

FILED
Oct 24, 2007
Secretary of State

Entity Name: MEDICAL CUBAN AMERICAN, INC

Current Principal Place of Business:

2335 STANFORD CT., STE. 502
NAPLES, FL 34112 US

New Principal Place of Business:

Current Mailing Address:

2335 STANFORD CT., STE. 502
NAPLES, FL 34112 US

New Mailing Address:

FEI Number: 46-0520045

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CHERCOLES, ERLIS
2335 STANFORD CT., STE. 502
NAPLES, FL 34112 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: ERLIS CHERCOLES

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CHERCOLES, ERLIS
Address: 2335 STANFORD CT., STE. 502
City-St-Zip: NAPLES, FL 34112 US

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 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: ERLIS CHERCOLES

Electronic Signature of Signing Officer or Director

P

10/24/2007

Date