

# 2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000039651

FILED  
Sep 20, 2005  
Secretary of State

Entity Name: MAINSTREET MEDICAL CENTER INC.

## Current Principal Place of Business:

8723 INTERNATIONAL DRIVE  
SUITE 115  
ORLANDO, FL 32819 US

## New Principal Place of Business:

## Current Mailing Address:

8723 INTERNATIONAL DRIVE  
SUITE 115  
ORLANDO, FL 32819 US

## New Mailing Address:

FEI Number: 11-3683993

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BAZEMORE, E J  
8723 INTERNATIONAL DR.  
SUITE 115  
ORLANDO, FL 32819 US

## Name and Address of New Registered Agent:

GAUCHAT, DIANA S  
8723 INTERNATIONAL DR.  
SUITE 115  
ORLANDO, FL 32819 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: DIANA S GAUCHAT

09/20/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: MR (X) Delete  
Name: BAZEMORE, E J  
Address: 8723 INTERNATIONAL DR., #115  
City-St-Zip: ORLANDO, FL 32819 US

Title: MS ( ) Delete  
Name: GAUCHAT, DIANA S  
Address: 8723 INTERNATIONAL DR., #115  
City-St-Zip: ORLANDO, FL 32819 US

Title: MS ( ) Delete  
Name: PALAZZOLO, ARLENE  
Address: 8723 INTERNATIONAL DR., #115  
City-St-Zip: ORLANDO, FL 32819 US

## 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: DIANA S GAUCHAT

MS

09/20/2005

Electronic Signature of Signing Officer or Director

Date