

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000055474

FILED
Apr 26, 2008
Secretary of State

Entity Name: MEDICAL MAVERICKS, INC.

Current Principal Place of Business:

70 ROSEMONT CIRCLE
ROCHESTER, NY 14617 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 12122
GAINESVILLE, FL 32604 US

New Mailing Address:

70 ROSEMONT CIRCLE
ROCHESTER, NY 14617 US

FEI Number: 73-1667194

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACIEL, BRUNO C
3751 SW 20TH AVE
#19
GAINESVILLE, FL 32607 US

Name and Address of New Registered Agent:

MACIEL, BRUNO C
1810 NW 23RD BLVD
#139
GAINESVILLE, FL 32605 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: BRUNO C. MACIEL

04/26/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WRIGHT, JOHN T
Address: 70 ROSEMONT CIRCLE
City-St-Zip: ROCHESTER, NY 14617 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: JOHN T. WRIGHT

P

04/26/2008

Electronic Signature of Signing Officer or Director

Date