

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000069307

FILED
May 29, 2008
Secretary of State

Entity Name: PHYSICIANS ACCESS GROUP, INC.

Current Principal Place of Business:

6630 BISCAYNE BLVD
MIAMI, FL 33738

New Principal Place of Business:

6630 BISCAYNE BLVD
MIAMI, FL 33138

Current Mailing Address:

6630 BISCAYNE BLVD
MIAMI, FL 33738

New Mailing Address:

6630 BISCAYNE BLVD
MIAMI, FL 33138

FEI Number: 20-0060585

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEGION PARK MEDICAL CENTER
6630 BISCAYNE BLVD
MIAMI, FL 33738 US

Name and Address of New Registered Agent:

COMPANY MANAGEMENT SERVICES, LLC
8788 S.W. 8TH STREET
MIAMI, FL 33174 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: SERGIO A. PAGLIERY

05/29/2008

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: P () Delete
Name: IKPE, HELEN
Address: 6630 BISCAYNE BLVD
City-St-Zip: MIAMI, FL 33738

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDC (X) Change () Addition
Name: MOISE, GUY RUDOLPH
Address: 6630 BISCAYNE BLVD
City-St-Zip: MIAMI, FL 33138

Title: VP () Change (X) Addition
Name: THOMAS, CLIFF
Address: 6630 BISCAYNE BLVD.
City-St-Zip: MIAMI, FL 33138

Title: S.T () Change (X) Addition
Name: DRAPKIN, RON
Address: 6630 BISCAYNE BLVD.
City-St-Zip: MIAMI, FL 33138

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: GUY RUDOLPH MOISE

P

05/29/2008

Electronic Signature of Signing Officer or Director

Date