2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000088359

Current Principal Place of Business:

DOCONILINI#1 03000000333

Entity Name: ROSE GARDEN MEDICAL PLAZA, INC.

FILED Apr 07, 2006 Secretary of State

3900 UNIVERSITY BLVD. SOUTH JACKSONVILLE, FL 32216

Current Mailing Address: New Mailing Address:

3900 UNIVERSITY BLVD. SOUTH JACKSONVILLE, FL 32216

FEI Number: 20-0148357 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TOWFIGH, ASHCHI 8477 GRAYLING R S JACKSONVILLE, FL 32256 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:

Electronic Signature of Registered Agent Date

New Principal Place of Business:

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

Name: KIM, SUNWOOK Name: KIM, SUNWOOK

 Address:
 PO BOX 24625
 Address:
 7803 HOLLYRIDGE ROAD

 City-St-Zip:
 JACKSONVILLE, FL 32241
 City-St-Zip:
 JACKSONVILLE, FL 32256

Title: D () Delete Title: () Change () Addition

 Name:
 ESFAHANI, NEGAR
 Name:

 Address:
 PO BOX 24625
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32241
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Intie:
 D
 () Delete
 Intie:

 Name:
 JAHJAH, MONA
 Name:

 Address:
 PO BOX 24625
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32241
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: SUNWOOK KIM D 04/07/2006