

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000089791

FILED
Jan 16, 2007
Secretary of State

Entity Name: LAS VILLAS MEDICAL CENTER INC.

Current Principal Place of Business:

11180 W. FLAGLER STREET, SUITE 14
SWEETWATER, FL 33174

New Principal Place of Business:

Current Mailing Address:

11180 W. FLAGLER STREET, SUITE 14
SWEETWATER, FL 33174

New Mailing Address:

FEI Number: 20-0185834

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIVERO, OSCAR
5397 WEST 15 CT
HIALEAH, FL 33012 US

Name and Address of New Registered Agent:

SANTANA, OSMANY F
14040 SW 47 ST
MIAMI, FL 33175 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: OSMANY F SANTANA

01/16/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RIVERO, OSCAR
Address: 5397 WEST 15 CT
City-St-Zip: HIALEAH, FL 33012

Title: P () Delete
Name: SANTANA, OSMANY F
Address: 11180 W. FLAGLER STREET, SUITE 14
City-St-Zip: SWEETWATER, FL 33174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SANTANA, OSMANY F
Address: 14040 SW 47 ST
City-St-Zip: MIAMI, FL 33175

Title: D (X) Change () Addition
Name: MUNGUIA, JESUS
Address: 2016 SW 136 PL
City-St-Zip: MIAMI, FL 33175

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: OSMANY F SANTANA

P

01/16/2007

Electronic Signature of Signing Officer or Director

Date