

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000115761

Entity Name: L. P. MEDICAL, INC.

FILED
Apr 30, 2007
Secretary of State

Current Principal Place of Business:

8585 S.W. SUNSET DR.
SUITE #45
MIAMI, FL 33143

New Principal Place of Business:

5101 SW 8TH STREET
SUITE #2-R
MIAMI, FL 33134

Current Mailing Address:

8585 S.W. SUNSET DR.
SUITE #45
MIAMI, FL 33143

New Mailing Address:

5101 SW 8TH STREET
SUITE #2-R
MIAMI, FL 33134

FEI Number: 57-1190962

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PORRELLO, LUCAS
13311 S.W. 101ST ST.
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: PORRELLO, LUCAS
Address: 13311 S.W. 101ST ST
City-St-Zip: MIAMI, FL 33186

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: LUCAS PORRELLO, M.D.

PSDT

04/30/2007

Electronic Signature of Signing Officer or Director

Date