

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000023906

FILED
Jan 08, 2008
Secretary of State

Entity Name: RESEARCH CENTER PHASE I-IV OF FLORIDA CORP.

Current Principal Place of Business:

10300 SUNSET DRIVE. SUITE 350
MIAMI, FL 33173

New Principal Place of Business:

11880 SW 40 ST. SUITE 216
MIAMI, FL 33175

Current Mailing Address:

10935 SW 174 TERRACE
MIAMI, FL 33157

New Mailing Address:

11880 SW 40 ST. SUITE 216
MIAMI, FL 33175

FEI Number: 75-3144995

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

YANES, AISBYL
10935 SW 174 TERRACE
MIAMI, FL 33157 US

Name and Address of New Registered Agent:

YANES, AISBYL
11880 SW 40 ST. SUITE 216
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: AISBYL YANES

01/08/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: YANES, AISBYL
Address: 10300 SUNSET DRIVE. SUITE 350
City-St-Zip: MIAMI, FL 33173

Title: V-PD () Delete
Name: PEREZ, OLGA M
Address: 10300 SUNSET DRIVE. SUITE 350
City-St-Zip: MIAMI, FL 33173

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PEREZ, OLGA M
Address: 11880 SW 40 ST. SUITE 216
City-St-Zip: MIAMI, FL 33175

Title: V-PD (X) Change () Addition
Name: YANES, AISBYL
Address: 11880 SW 40 ST. SUITE 216
City-St-Zip: MIAMI, FL 33175

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: OLGA M. PEREZ

PD

01/08/2008

Electronic Signature of Signing Officer or Director

Date