2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Apr 10, 2008
Secretary of State

DOCUMENT# P04000065515

Entity Name: SUNSHINE STATE MEDICAL, INC.

Current Principal Place of Business:

5575 SOUTH SEMORAN BLVD.
SUITE 503
ORLANDO, FL 32822 US

New Principal Place of Business:

5575 SOUTH SEMORAN BOULEVARD
SUITE 503
ORLANDO, FL 32822

Current Mailing Address:

5575 SOUTH SEMORAN BLVD.
SUITE 503
ORLANDO, FL 32822 US

New Mailing Address:

5575 SOUTH SEMORAN BOULEVARD
SUITE 503
ORLANDO, FL 32822

FEI Number: 56-2454234 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HAGOOD, PETER P
1018 EAST ROBINSON STREET
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

BHAVSAR, GIFFORD & HAGOOD
1053 MAITLAND CENTER COMMONS
SUITE 101
MAITLAND, FL 32751 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: PETER P. HAGOOD 04/10/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ORTIZ, MARTHA C
Address: 2301 DRYBURGH COURT
City-St-Zip: ORLANDO, FL 32828 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ORTIZ, MARTHA
Address: 2301 DRYBURGH COURT
City-St-Zip: ORLANDO, FL 32828 US

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: MARTHA ORTIZ P 04/10/2008
Electronic Signature of Signing Officer or Director Date