

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000096927

FILED
Jan 20, 2006
Secretary of State

Entity Name: STARMED MEDICAL CENTER #2, INC.

Current Principal Place of Business:

650 EAST 49TH STREET
HIALEAH, FL 33013

New Principal Place of Business:

2491 NW 7TH STREET
MIAMI, FL 33125

Current Mailing Address:

650 EAST 49TH STREET
HIALEAH, FL 33013

New Mailing Address:

2491 NW 7TH STREET
MIAMI, FL 33125

FEI Number: 43-2054233

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PALMA, FRANK
875 E 52 ST
HIALEAH, FL 33013 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: P () Delete
Name: PALMA, FRANKLIN
Address: 875 E 52 ST
City-St-Zip: HIALEAH, FL 33013

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 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: FRANKLIN PALMA

PRS

01/20/2006

Electronic Signature of Signing Officer or Director

Date