2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000118065

Entity Name: KATE'S MEDICAL CENTER CORP.

FILED Oct 11, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8210 A WEST FLAGLER STREET 8210 WEST FLAGLER STREET

MIAMI, FL 33144 MIAMI, FL 33144

Current Mailing Address: New Mailing Address:

8210 A WEST FLAGLER STREET 8210 WEST FLAGLER STREET

MIAMI, FL 33144 MIAMI, FL 33144

FEI Number: 51-0520150 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FIGUEROA, HILDA FIGUEROA, HILDA 8210 A WEST FLAGLER STREET 8210 WEST FLAGLER STREET

MIAMI, FL 33144 MIAMI, FL 33144

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: HILDA FIGUEROA 10/11/2005

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition Title: () Delete

FIGUEROA, HILDA Name: Name: 8210 A WEST FLAGLER STREET Address: Address: City-St-Zip: MIAMI, FL 33144 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutés. 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: HILDA FIGUEROA PD 10/11/2005