

2009 FOR PROFIT CORPORATION REINSTATEMENT

**FILED
Nov 18, 2009
Secretary of State**

DOCUMENT# P04000139159

Entity Name: BLUE MEDICAL NETWORK INC

Current Principal Place of Business:

330 S.W. 27 AVENUE
SUITE #703
MIAMI, FL 33135

New Principal Place of Business:

Current Mailing Address:

330 S.W. 27 AVENUE
SUITE #703
MIAMI, FL 33135

New Mailing Address:

FEI Number: 20-1716608 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALDES, ROLANDO
330 S.W. 27 AVENUE
SUITE #703
MIAMI, FL 33135 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: ROLANDO VALDES

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:

Title: DP () Delete
Name: VALDES, ROLANDO
Address: 330 S.W. 27 AVENUE, SUITE #703
City-St-Zip: MIAMI, FL 33135

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: ROLANDO VALDES

Electronic Signature of Signing Officer or Director

PST

11/18/2009

Date