## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000157252

Entity Name: MED EXPERTS OF TAMPA, INC.

BRANDON, FL 33511 US

City-St-Zip:

FILED Mar 19, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 329 BATH CLUB BLVD. SOUTH NORTH REDINGTON BEACH, FL 33708 LIS **Current Mailing Address: New Mailing Address:** 608 OAKMOSS DRIVE 329 BATH CLUB BLVD. SOUTH BRANDON, FL 33511 NORTH REDINGTON BEACH, FL 33708 US US FEI Number: 03-0560689 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: ECKSTEIN, NGA 329 BATH CLUB BLVD S. N. REDINGTON BEACH, FL 33708 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition ECKSTEIN, NGA Name: Name: 329 BATH CLUB BLVD SOUTH Address: Address: City-St-Zip: N. REDINGTON BEACH, FL 33708 US City-St-Zip: Title: Title: () Change () Addition () Delete Name: DENK, ROB Name: 608 OAKMOSS DR Address: 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: NGA ECKSTEIN PRES 03/19/2009