PO4000158031

(Re	equestor's Name)	
(Ac	ldress)	
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(Ac	ldress)	
(Ci	ty/State/Zip/Phone	÷ #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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T. Roberts APR 1 3 2007

COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations
SUBJECT: Medical Consultants, Inc.
DOCUMENT NUMBER: <u>P04000158031</u>
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Herry Kijner (Name of Contact Person)
Medical Consultants (Firm/Company)
3731 North Park Rd (Address)
Hollywood, FL 3302/ (City/State and Zip Code)
For further information concerning this matter, please call:
Herry Kijner at (954) 558-3285 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$\text{\$\subset\$}\$
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

FILED 07 APR 10 PM 2: 31

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following E articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:	
	Medical Consultants, Inc.	
SECOND:	The document number of the corporation (if known): P0400015 803	
THIRD:	The file date of the articles of incorporation: $11-19-04$	
FOURTH:	(CHECK AT LEAST ONE BOX)	
	None of the corporation's shares have been issued.	
	The corporation has not commenced business.	
FIFTH:	No debt of the corporation remains unpaid.	
	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.	
SEVENTH:	Adoption of Dissolution (CHECK ONE)	
	A majority of the incorporators authorized the dissolution.	
	A majority of the directors authorized the dissolution.	
Signa	(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver trustly, or other court appointed fiduciary, by that fiduciary.)	
	(Typed or printed name of person signing)	
	Divector (Title of Person Signing)	

Filing Fee: \$35