

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000169853

Entity Name: RIF MEDICAL GROUP, INC.

FILED
Feb 16, 2006
Secretary of State

Current Principal Place of Business:

6031 SW 8 ST
MIAMI, FL 33144

New Principal Place of Business:

815 NW 57 AVE
SUITE 114
MIAMI, FL 33126

Current Mailing Address:

6031 SW 8 ST
MIAMI, FL 33144

New Mailing Address:

815 NW 57 AVE
SUITE 114
MIAMI, FL 33126

FEI Number: 20-2087101

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERNANDEZ, ADOLFO
6031 SW 8 ST
MIAMI, FL 33144 US

Name and Address of New Registered Agent:

FERNANDEZ, ADOLFO
815 NW 57 AVE
SUITE 114
MIAMI, FL 33126 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: ADOLFO FERNANDEZ

02/16/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FERNANDEZ, ADOLFO
Address: 7071 SW 47TH STREET, SUITE 1
City-St-Zip: MIAMI, FL 33155

Title: VD () Delete
Name: OTANO, RAFAEL
Address: 6031 SW 8 ST
City-St-Zip: MIAMI, FL 33144

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: OTANO, RAFAEL
Address: 2547 SW 16 TR
City-St-Zip: MIAMI, FL 33145

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: ADOLFO FERNANDEZ

PD

02/16/2006

Electronic Signature of Signing Officer or Director

Date