

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000016383

FILED  
Jan 03, 2006  
Secretary of State

Entity Name: CARPUS MEDICAL CENTER, CORP.

## Current Principal Place of Business:

15035 SW 58 STREET  
MIAMI, FL 33193

## New Principal Place of Business:

475 BILTMORE WAY  
SUITE 309  
CORAL GABLES, FL 33134

## Current Mailing Address:

15035 SW 58 STREET  
MIAMI, FL 33193

## New Mailing Address:

475 BILTMORE WAY  
SUITE 309  
CORAL GABLES, FL 33134

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CABRERA, ELADIO  
7510 SW 19 TERR  
MIAMI, FL 33155 US

## Name and Address of New Registered Agent:

RODRIGUEZ, PEDRO L  
475 BILTMORE WAY  
SUITE 309  
CORAL GABLES, FL 33134 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: PEDRO RODRIGUEZ

01/03/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: REYES, SEIDEL  
Address: 15035 SW 58 STREET  
City-St-Zip: MIAMI, FL 33193

Title: D ( ) Delete  
Name: RODRIGUEZ, PEDRO  
Address: 7510 SW 19 TERR  
City-St-Zip: MIAMI, FL 33155

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition  
Name: RODRIGUEZ, PEDRO  
Address: 475 BILTMORE WAY SUITE 309  
City-St-Zip: CORAL GABLES, FL 33134

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: PEDRO RODRIGUEZ

D

01/03/2006

Electronic Signature of Signing Officer or Director

Date