

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000051072

Entity Name: BURGOS MEDICAL CORP

FILED  
Apr 26, 2006  
Secretary of State

## Current Principal Place of Business:

7457 W 34 LANE  
HIALEAH, FL 33018

## New Principal Place of Business:

1840 W 49 ST  
SUITE 710  
HIALEAH, FL 33012

## Current Mailing Address:

7457 W 34 LANE  
HIALEAH, FL 33018

## New Mailing Address:

1840 W 49 ST  
SUITE 710  
HIALEAH, FL 33012

FEI Number: 20-2636015

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HERNANDEZ, MAIDELYS  
7457 W 34 LANE  
HIALEAH, FL 33018 US

## Name and Address of New Registered Agent:

HERNANDEZ, MAIDELYS  
17973 NW 87 PL  
MIAMI, FL 33018 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: MAIDELYS HERNANDEZ

04/26/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: HERNANDEZ, MAIDELYS  
Address: 7457 W 34 LANE  
City-St-Zip: HIALEAH, FL 33018

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: HERNANDEZ, MAIDELYS  
Address: 17973 NW 87 PL  
City-St-Zip: MIAMI, FL 33018

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: MAIDELYS HERNANDEZ

PD

04/26/2006

Electronic Signature of Signing Officer or Director

Date