

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000073694

FILED
Mar 08, 2007
Secretary of State

Entity Name: KROME MEDICAL CENTER INC.

Current Principal Place of Business:

19762 SW 177 AVE
MIAMI, FL 33187

New Principal Place of Business:

Current Mailing Address:

19762 SW 177 AVE
MIAMI, FL 33187

New Mailing Address:

FEI Number: 20-2874220

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PADRO, IVETTE
19762 SW 177 AVE
MIAMI, FL 33187 US

Name and Address of New Registered Agent:

MON, GEIDY
19762 SW 177 AVE
MIAMI, FL 33187 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: GEIDY MON

03/08/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PADRO, ROLANDO R M.D.
Address: 19762 SW 177 AVE
City-St-Zip: MIAMI, FL 33187

Title: D () Delete
Name: PADRO, IVETTE
Address: 19762 SW 177 AVE
City-St-Zip: MIAMI, FL 33187

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FERNANDEZ, JOSE R M.D.
Address: 19762 SW 177 AVE
City-St-Zip: MIAMI, FL 33187

Title: VP (X) Change () Addition
Name: MON, GEIDY
Address: 19762 SW 177 AVE
City-St-Zip: MIAMI, FL 33187

Title: S () Change (X) Addition
Name: DUQUE, GUSTAVO
Address: 19762 SW 177 AVE
City-St-Zip: MIAMI, FL 33187

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: JOSE R. FERNANDEZ

P

03/08/2007

Electronic Signature of Signing Officer or Director

Date