

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000091327

Entity Name: RILA'S MEDICAL CARE CORP

FILED
May 01, 2007
Secretary of State

Current Principal Place of Business:

7392 NW 35TH TERR STE 202
MIAMI, FL 33122

New Principal Place of Business:

14629 SW 104TH. STREET
505
MIAMI, FL 33186

Current Mailing Address:

7392 NW 35TH TERR STE 202
MIAMI, FL 33122

New Mailing Address:

14629 SW 104TH. STREET
505
MIAMI, FL 33186

FEI Number: 20-3063953

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROSALES CASTELLANOS, LENNER
1020 SW 23RD AVENUE
APT. # 5
MIAMI, FL 33135 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ROSALES CASTELLANOS, LENNER
Address: 1020 SW 23RD AVENUE, APT. # 5
City-St-Zip: MIAMI, FL 33135

Title: VD () Delete
Name: ROSALES CASTELLANOS, LENNER
Address: 1020 SW 23RD AVENUE, APT. # 5
City-St-Zip: MIAMI, FL 33135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify 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: LENNER ROSALES

PD

05/01/2007

Electronic Signature of Signing Officer or Director

Date