

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000106768

FILED
May 10, 2007
Secretary of State

Entity Name: KADOSH MEDICAL SERVICES INC.

Current Principal Place of Business:

515 SW 17TH AVE
SUITE 3
MIAMI, FL 33125

New Principal Place of Business:

5931 S W 8 STREET
MIAMI, FL 33144

Current Mailing Address:

515 SW 17TH AVE
SUITE 3
MIAMI, FL 33125

New Mailing Address:

5931 S W 8 STREET
MIAMI, FL 33144

FEI Number: 20-3239621

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARIAS, ANIAH L.
3382 SW 29 STREET
MIAMI, FL 33133 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: PS () Delete
Name: ARIAS, ANIAH L.
Address: 3382 SW 29 STREET
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ANIAH L ARIAS

PRS

05/10/2007

Electronic Signature of Signing Officer or Director

Date