## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000133413

Entity Name: COOMEVA MEDICAL CENTER, INC

FILED Jul 01, 2009 Secretary of State

Current Pi	rincipal Place	of Business:	New Principal Place o	New Principal Place of Business:	
8260 W FL MIAMI, FL	AGLER STRE 33144	ET STE 1-C			
Current Mailing Address:			New Mailing Address:		
8260 W FL MIAMI, FL	AGLER STRE 33144	ET STE 1-C			
FEI Number:	35-2262461	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
	AL, EDGAR AGLER STRE 33144 US	ET STE 1-C			
The above in the State		submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE:				
	Electror	ic Signature of Registered Age	ent	Date	
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution ( ).	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CARRASCAL, É	ER STREET STE 1-C	Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition	

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: EDGAR CARRASCAR LARA PD 07/01/2009