2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000005395

Entity Name: ESSENTIAL MEDICAL CENTER, INC.

FILED Oct 21, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1490 WEST 49 PLACE SUITE 590 HIALEAH, FL 33012

Current Mailing Address: New Mailing Address:

1490 WEST 49 PLACE PO BOX 28075 SUITE 398 HIALEAH, FL 33002 HIALEAH, FL 33012

FEI Number: 56-2551457 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GARCIA, MARIA V 1490 WEST 49TH PLACE SUITE # 398 HIALEAH, FL 33012 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: MARIA VICTORIA GARCIA

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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

Name: GARICA, MARIA V Name: GARICA, MARIA V

Address: 1490 WETS 49TH PLACE SUITE# 398 Address: 1490 WEST 49TH PLACE SUITE# 398

City-St-Zip: HIALEAH, FL 33012 City-St-Zip: HIALEAH, FL 33012

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: MARIA VICTORIA GARCIA P 10/21/2009