2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 11, 2008
Secretary of State

DOCUMENT# P06000022911

Entity Name: EXPERT HEALTH MEDICAL GROUP INC.

Current Principal Place of Business:

9586 NW 41 ST
STE. A
DORAL, FL 33178

New Principal Place of Business:

Current Mailing Address:

9586 NW 41 ST
STE. A
DORAL, FL 33178

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CABALLERO, RAIDEL A
9586 NW 41 ST
STE. 4
DORAL, FL 33178 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: VP ( ) Delete
Name: CABALLERO, RAIDEL A
Address: 9586 NW 41 ST., STE. A
City-St-Zip: DORAL, FL 33178

Title: P ( ) Delete
Name: GALBAN, ARMANDO
Address: 2608 SW 46 TERRACE
City-St-Zip: CAPE CORAL, FL 33914

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP ( ) Change (X) Addition
Name: LOPEZ, PABLO J
Address: 2531 SW 15 STREET
City-St-Zip: MIAMI, FL 33145 US

Title: TRES ( ) Change (X) Addition
Name: SALCEDO, RUBEIELA
Address: 2531 SW 15 STREET
City-St-Zip: MIAMI, FL 33145 US

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: ADAIRIES CABALLERO SEC 06/11/2008

Electronic Signature of Signing Officer or Director — Date