

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000053469

FILED
Jul 27, 2007
Secretary of State

Entity Name: LIBERTY MEDICAL CENTER, INC.

Current Principal Place of Business:

2731 CORAL WAY
MIAMI, FL 33145

New Principal Place of Business:

8181 NW 36TH STREET
SUITE 28
DORAL, FL 33166

Current Mailing Address:

2731 CORAL WAY
MIAMI, FL 33145

New Mailing Address:

8181 NW 36TH STREET
SUITE 28
DORAL, FL 33166

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTINEZ, ALBERTO Y
2731 CORAL WAY
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

MARTINEZ, ALBERTO Y
8181 NW 36TH STREET
SUITE 28
DORAL, FL 33166 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:

07/27/2007

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: DP () Delete
Name: MARTINEZ, ALBERTO Y
Address: 2731 CORAL WAY
City-St-Zip: MIAMI, FL 33145

Title: DV () Delete
Name: MARQUEZ, GISEL
Address: 2731 CORAL WAY
City-St-Zip: MIAMI, FL 33145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: MARTINEZ, ALBERTO Y
Address: 8181 NW 36TH STREET, SUITE 28
City-St-Zip: MIAMI, FL 33166

Title: DV (X) Change () Addition
Name: MARQUEZ, GISEL
Address: 8181 NW 36TH STREET #28
City-St-Zip: DORAL, FL 33166

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: ALBERTO Y. MARTINEZ

DP

07/27/2007

Electronic Signature of Signing Officer or Director

Date