## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000106119

City-St-Zip: MIAMI, FL 33144

Entity Name: ASTRA MEDICAL CENTER, INC.

FILED May 01, 2007 Secretary of State

-		,			
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
8380 SW MIAMI, FL					
Current Mailing Address:			New Mailing Address:		
8380 SW MIAMI, FL					
FEI Number	r: 20-5382795	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	d Address of	Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
SUAREZ, 2528 NE 4 HOMEST		35121 US			
	e named entity te of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATU	IRE:				
Electronic Signature of Registered Agent			ent	Date	
		93(2)(b), F.S., the corporation did no g Trust Fund Contribution ( ).	t receive the prior notice.		
OFFICER	S AND DIREC	CTORS:	ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address:	P ( SUAREZ, ENIE 8380 SW 8 ST		Title: Name: Address:	( ) Change ( ) Addition	

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: ENIER P 05/01/2007