2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000008520

Entity Name: PIONEER MEDICAL CONSULTANTS INC.

FILED Apr 18, 2009 Secretary of State

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

1433 LENTON ROSE COURT 2904 TRINITY COTTAGE DR NEW PORT RICHIE, FL 34655 US LAND O LAKES, FL 34638 US

Current Mailing Address: New Mailing Address:

1433 LENTON ROSE COURT 2904 TRINITY COTTAGE DR NEW PORT RICHIE, FL 34655 US LAND O LAKES, FL 34638 US

FEI Number: 26-0790338 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:

TALWAR, SATBIR

1433 LENTON ROSE COURT

NEW PORT RICHIE, FL 34655 US

TALWAR, SATBIR

2904 TRINITY COTTAGE DR

LAND O LAKES, FL 34638 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: SATBIR TALWAR 04/18/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

 Title:
 P
 () Delete

 Name:
 TALWAR, SIMARPREET K

 Address:
 1433 LENTON ROSE COURT

 City-St-Zip:
 NEW PORT RICHIE, FL 34655 US

 Title:
 VP
 () Delete

 Name:
 TALWAR, SATBIR S

 Address:
 1433 LENTON ROSE COURT

 City-St-Zip:
 NEW PORT RICHIE, FL 34655 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TALWAR, SIMARPREET K
Address: 2904 TRINITY COTTAGE DR
City-St-Zip: LAND O LAKES, FL 34638 US

Title: VP (X) Change () Addition

Name: TALWAR, SATBIR S
Address: 2904 TRINITY COTTAGE DR
City-St-Zip: LAND O LAKES, FL 34638 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: SATBIR TALWAR VP 04/18/2009