2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000008520

Entity Name: PIONEER MEDICAL CONSULTANTS INC.

Electronic Signature of Registered Agent

FILED Jul 12, 2010 Secretary of State

Date

| Current Principal Place of Business: | | New Principal Place of Business: | |
|--|--------------------------------|---|--------------------------------------|
| 2904 TRINITY COTTAGE [LAND O LAKES, FL 34638 | | | |
| Current Mailing Address: | | New Mailing Address: | |
| 2904 TRINITY COTTAGE [LAND O LAKES, FL 34638 | | | |
| 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 2904 TRINITY COTTAGE I LAND O LAKES, FL 34638 | | | |
| The above named entity su in the State of Florida. | bmits this statement for the p | ourpose of changing its registered | office or registered agent, or both, |

OFFICERS AND DIRECTORS:

Title:

SIGNATURE:

Name: TALWAR, SIMARPREET K
Address: 2904 TRINITY COTTAGE DR
City-St-Zip: LAND O LAKES, FL 34638 US

Title: VF

Name: TALWAR, SATBIR S
Address: 2904 TRINITY COTTAGE DR
City-St-Zip: LAND O LAKES, FL 34638 US

I hereby 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 all other like empowered.

SIGNATURE: SATBIR TALWAR VP 07/12/2010