2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008
Secretary of State

DOCUMENT# P07000029399

Entity Name: RANI'S MEDICAL CENTER INC

Current Principal Place of Business:

1280 SW 1ST ST
STE 4
MIAMI, FL 33125

New Principal Place of Business:

1280 SW 1ST ST
SUITE 1
MIAMI, FL 33135

Current Mailing Address:

1280 SW 1ST ST
STE 4
MIAMI, FL 33125

New Mailing Address:

1280 SW 1ST ST
SUITE 1
MIAMI, FL 33135

FEI Number: 20-8599599 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

UNCAL, TERESA
1280 SW 1ST ST
STE 4
MIAMI, FL 33125 US

Name and Address of New Registered Agent:

UNCAL, TERESA
1280 SW 1ST ST
SUITE 1
MIAMI, FL 33135 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: 04/28/2008
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete
Name: UNCAL, TERESA
Address: 1280 SW 1ST ST - STE 4
City-St-Zip: MIAMI, FL 33125

Title: VP ( ) Delete
Name: UNCAL, TERESA
Address: 1280 SW 1ST ST - STE 4
City-St-Zip: MIAMI, FL 33125

Title: V ( ) Delete
Name: MORA, MAGGIE C
Address: 1280 SW 1ST ST - STE 4
City-St-Zip: MIAMI, FL 33125

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition
Name: UNCAL, TERESA
Address: 1280 SW 1ST ST - SUITE 1
City-St-Zip: MIAMI, FL 33135

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

Title: V (X) Change ( ) Addition
Name: MORA, MAGGIE C
Address: 1280 SW 1ST ST - SUITE 1
City-St-Zip: MIAMI, FL 33135

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: TERESA G. UNCAL PSTD 04/28/2008
Electronic Signature of Signing Officer or Director — Date