2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000064071

Entity Name: CORAL PROVIDER SERVICES OF FLORIDA, INC.

FILED Apr 30, 2008 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:		
2820 SW 101 CT. MIAMI, FL 33165				5240 BANK ST #13. FORT MYERS, FL 33907		
Current Mailing Address:				New Mailing Address:		
2820 SW 1 MIAMI, FL				5240 BANK ST #13. FORT MYERS, FL 339	907	
FEI Number:	: 26-0271513	FEI Number Applied For ()	FEI Nun	nber Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
ESCARPIO, MARIA C 2820 SW 101 CT. MIAMI, FL 33165 US				ESCARPIO, MARIA C 5240 BANK ST #13. FORT MYERS, FL 33907 US		
	named entity e of Florida.	submits this statement for the	purpose o	f changing its registered	d office or registered agent, or both,	
SIGNATURE:				04/30/2008		
	Electro	nic Signature of Registered Ag	gent		Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD (ESCARPIO, M 2820 SW 101 MIAMI, FL 331	CT.		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD (DIAZ, GRISEL 2075 SW 122 MIAMI, FL 331			Title: Name: Address: City-St-Zip:	() Change () Addition	

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: MARIA C ESCARPIO PD 04/30/2008