

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000082794

FILED
Nov 03, 2008
Secretary of State

Entity Name: EMINENCE MEDICAL CENTER INC.

Current Principal Place of Business:

7392 NW 35 TERRACE
SUITE# 310
MIAMI, FL 33122

New Principal Place of Business:

Current Mailing Address:

7392 NW 35 TERRACE
SUITE# 310
MIAMI, FL 33122

New Mailing Address:

FEI Number: 45-0567770

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:

MUNOZ, FRANCISCO F
7392 NW 35 TERRACE
SUITE # 310
MIAMI, FL 33122 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: FRANCISCO F. MUNOZ

11/03/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MUNOZ, FRANCISCO F
Address: 7392 NW 35 TERRACE SUITE# 310
City-St-Zip: MIAMI, FL 33122

Title: () Change () Addition
Name:
Address:
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: FRANCISCO F. MUNOZ

P

11/03/2008

Electronic Signature of Signing Officer or Director

Date