

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000122978

FILED
Jan 15, 2008
Secretary of State

Entity Name: MEDICAID CONSULTING SERVICES INC

Current Principal Place of Business:

1720 S.W. 98 CT
MIAMI, FL 33165

New Principal Place of Business:

Current Mailing Address:

1720 S.W. 98 CT
MIAMI, FL 33165

New Mailing Address:

FEI Number: 26-1464790

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUGARRA, GIRLFREDO I
1720 S.W. 98 CT
MIAMI, FL 33165 US

Name and Address of New Registered Agent:

SARDINA, ELIZABETH
7649 NW 182 TERRACE
MIAMI, FL 33015 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: ELIZABETH SARDINA

01/15/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SARDINA, ELIZABETH
Address: 7649 N.W. 182 TERR
City-St-Zip: MIAMI, FL 33015

Title: V (X) Delete
Name: MUGARRA, GIRLFREDO
Address: 1720 S.W. 98 CT
City-St-Zip: MIAMI, FL 33165

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: ELIZABETH SARDINA

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01/15/2008

Electronic Signature of Signing Officer or Director

Date