

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000012624

Entity Name: NGS MEDICAL CENTER, INC.

FILED  
Nov 04, 2009  
Secretary of State

## Current Principal Place of Business:

5788 SW 8TH ST.  
WEST MIAMI, FL 33144

## New Principal Place of Business:

## Current Mailing Address:

5788 SW 8TH ST.  
WEST MIAMI, FL 33144

## New Mailing Address:

FEI Number: 26-1887417

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FUETES, MARIO  
5788 SW 8TH STREET  
WEST MIAMI, FL 331445034 US

## Name and Address of New Registered Agent:

FUERTES, MARIO J  
5788 SW 8TH STREET  
WEST MIAMI, FL 331445034 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: MARIO FUERTES

11/04/2009

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:

Title: D ( ) Delete  
Name: FUERTES, MARIO  
Address: 5524 SW 8TH STREET  
City-St-Zip: CORAL GABLES, FL 33134

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: FUERTES, MARIO  
Address: 5788 SW 8TH STREET  
City-St-Zip: MIAMI, FL 33144

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: MARIO FUERTES

P

11/04/2009

Electronic Signature of Signing Officer or Director

Date