2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# P08000060522

Entity Name: BLUECOAST MEDICAL SERVICES, INC.

Current Principal Place of Business:

15343 SW 178 STREET
MIAMI, FL 33187 US

New Principal Place of Business:

15434 SW 116 TERRACE
MIAMI, FL 33196 US

Current Mailing Address:

15343 SW 178 STREET
MIAMI, FL 33187 US

New Mailing Address:

15434 SW 116 TERRACE
MIAMI, FL 33196 US

FEI Number: 26-2905756 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ACOSTA, JORGE E
15343 SW 178 STREET
MIAMI, FL 33187 US

Name and Address of New Registered Agent:

LEONCIO, RENE F
8301 NW 103RD STREET
SUITE # 202
HIALEAH GARDENS, FL 33016 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: RENE F. LEONCIO 05/01/2009
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: P ( ) Delete
Name: ACOSTA, JORGE E
Address: 15343 SW 178 STREET
City-St-Zip: MIAMI, FL 33187

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ACOSTA, JORGE E
Address: 15434 SW 116 TERRACE
City-St-Zip: MIAMI, FL 33196

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: RENE F. LEONCIO POA 05/01/2009
Electronic Signature of Signing Officer or Director Date