

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000079191

Entity Name: BLUE KROSS MEDICAL, INC.

FILED  
Jan 29, 2009  
Secretary of State

## Current Principal Place of Business:

325 S. BISCAYNE BLVD.  
APT. 2323  
MIAMI, FL 33131 US

## New Principal Place of Business:

4300 ALTON ROAD  
MIAMI, FL 33140 US

## Current Mailing Address:

325 S. BISCAYNE BLVD.  
APT. 2323  
MIAMI, FL 33131 US

## New Mailing Address:

P.O. BOX 347273  
MIAMI, FL 33234 US

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

KESHVARI-RASTI, HAMID  
325 S. BISCAYNE BLVD.  
APT. 2323  
MIAMI, FL 33131 US

## Name and Address of New Registered Agent:

KESHVARI-RASTI, HAMID  
325 S BISCAYNE BLVD  
UNIT 2323  
MIAMI, FL 33131 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: HAMID KESHVARI-RASTI

01/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: KESHVARI-RASTI, HAMID  
Address: 325 S. BISCAYNE BLVD., APT. 2323  
City-St-Zip: MIAMI, FL 33131 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: KESHVARI-RASTI, HAMID  
Address: 325 S BISCAYNE BLVD - UNIT 2323  
City-St-Zip: MIAMI, FL 33131 US

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: HAMID KESHVARI-RASTI

P

01/29/2009

Electronic Signature of Signing Officer or Director

Date