

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000109095

FILED
Feb 16, 2010
Secretary of State

Entity Name: HOMESTEAD CLINICAL RESEARCH GROUP, P.A.

Current Principal Place of Business:

27501 EAST DIXIE HWY., SUITE 200
SUITE 200
HOMESTEAD, FL 33032

New Principal Place of Business:

11285 S. W. 211ST.
SUITE 205
CUTLER BAY, FL 33189

Current Mailing Address:

27501 EAST DIXIE HWY., SUITE 200
HOMESTEAD, FL 33032

New Mailing Address:

11285 S. W. 211ST.
SUITE 205
CUTLER BAY, FL 33189

FEI Number: 26-3894421

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MALDONADO, HECTOR M
27501 EAST DIXIE HWY., SUITE 200
HOMESTEAD, FL 33032 US

Name and Address of New Registered Agent:

MALDONADO, HECTOR M
11285 S. W. 211 ST.
SUITE 205
CUTLER BAY, FL 33189 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: HECTOR M MALDONADO

02/16/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D
Name: MALDONADO, HECTOR M
Address: 11285 S. W. 211 ST. SUITE 205
City-St-Zip: CUTLER BAY, FL 33189

Title: D
Name: MENENDEZ, MICHAEL
Address: 11285 S. W. 211 ST.
City-St-Zip: CUTLER BAY, FL 33189

I hereby 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 all other like empowered.

SIGNATURE: HECTOR M MALDONADO

PRES

02/16/2010

Electronic Signature of Signing Officer or Director

Date