2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P09000095365

Entity Name: MAGI HEALTH CARE CLINIC INC

FILED Mar 07, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

600 E 25 ST SUITE A 600 E 25 ST SUITE ABC HIALEAH, FL 33013 HIALEAH, FL 33013

Current Mailing Address: New Mailing Address:

600 E 25 ST SUITE A 600 E 25 ST SUITE ABC HIALEAH, FL 33013 HIALEAH, FL 33013

FEI Number: 27-1380393 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ORTIZ, MAYELIN
600 E 25 ST SUITE A
HIALEAH, FL 33013 US
ORTIZ, MAYELIN
600 E 25 ST SUITE ABC
HIALEAH, FL 33013 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: 03/07/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

 Name:
 ORTIZ, MAYELIN

 Address:
 600 E 25 ST SUITE ABC

 City-St-Zip:
 HIALEAH, FL 33013

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: MAYELIN ORTIZ PD 03/07/2011