2011 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Nov 03, 2011
Secretary of State

DOCUMENT# P10000017849

Entity Name: CENTRO CLINICO MATERNO ZULIA, INC.

Current Principal Place of Business:

7269 NW 113 CT
DORAL, FL 33178

New Principal Place of Business:

Current Mailing Address:

7269 NW 113 CT
DORAL, FL 33178

New Mailing Address:

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

Name and Address of Current Registered Agent:

ANDRADE, PABLO
7269 NW 113 CT
CORAL, FL 33178 US

Name and Address of New Registered Agent:

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: PABLO ANDRADE
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P
Name: GONZALEZ, TERESA
Address: 7269 NW 113 CT
City-St-Zip: DORAL, FL 33178

Title: S
Name: ANDRADE, PABLO
Address: 7269 NW 113 CT
City-St-Zip: DORAL, FL 33178

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: PABLO ANDRADE PD 11/03/2011
Electronic Signature of Signing Officer or Director Date