2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000056665

Entity Name: MAXIMAL TRUST HEALTH CARE, INC.

FILED Apr 11, 2012 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:		
11890 S.W. 8TH ST. SUITE 206 MIAMI, FL 33184				
Current Mailing Address:		New Mailing Address:		
11890 S.W. 8TH ST. SUITE 206 MIAMI, FL 33184				
FEI Number: 27-3019036	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
SOSA, NIVALDO L 7237 W 29 LANE HIALEAH, FL 33018 I	Js			
The above named entity in the State of Florida.	submits this statement for the բ	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATURE:				
Electror	nic Signature of Registered Age	ent	Date	

OFFICERS AND DIRECTORS:

Title: PE

Name: SOSA, NIVALDO L Address: 7237 W 29 LANE City-St-Zip: HIALEAH, FL 33018

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: NIVALDO SOSA PD 04/11/2012