2006 FOR PROFIT CORPORATION ANNUAL REPORT

May 23, 2006 8:00 am Secretary of State **DOCUMENT # P94000061749** 05-23-2006 90010 031 ***150.00 1. Entity Name ACR MEDICAL ARTS, INC. Principal Place of Business Mailing Address 16244 S. MILITARY TRAIL 14895 BUILTMORE WAY 207 120 DELRAY BEACH, FL 33446 DELRAY BEACH, FL 33484 US US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 05162006 CR2E034 (11/05) Chg-P City & State City & State 4. FE! Number Applied For 65-0514853 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BURSTEIN, R. RACHEL Street Address (P.O. Box Number is Not Acceptable) 14895/BULTRANE WAY #207 DELRAY BEACH, FL City Zip Code FI 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. corporation did not receive the prior notice. Due by September 6, 2006 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. **PST** uddraw Change TITLE TITLE ☐ Addition ☐ Delete BURSTEIN, RR NAME NAME STREET ADDRESS 14895:BULTARE:WAY:#207-STREET ADDRESS CITY-ST-ZIP DELRAY BEACH, FL 33446 CITY-ST-7IP TITLE ☐ Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

ME OF SIGNING OFFICER OR DIRECTOR

FILED

Daytime Phone #

ATTACHMENT ACR MEDICAL ARTS, INC. 40094020 new address of registered agent: R. Rachel Burstein, A.P. Acupuncture Physician 15364 Lakes of Delray Blod Delray Beach Fl 33484 5/1/06 Hereseon of Corporations Sept of State Tallahassee, Fl. 32314 Re: ACR medical-arts, Lar, P940000 61749 Please note, because of the Hurricane Heattener: and damage to my previous residence, I have just completed moving. They new office addressis 16244 So. Military Trail, #120, Heliay Beach 33484. My new horse address is 15364 Lakes of Debray Blod., #61, Helray Beach, 33484. My computer is not yel in service for intersell! I am therefore Inclosing check for \$15000 for annual report. Thunk you for your consideration. K'Kachel Bustein, Pres. - Secy.