P90000008472

Office Use Only



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10/23/07--01004--026 ++358.00

SECRETARY OF STATEMS OF OCT 23 PM 1:54

COVER LETTER

TO:	: Amendment Section Division of Corporations	
SUBJ	BJECT: Belo Medical Center Purchasing, Inc.	
	(Name of Corpor	ation)
DOC	CUMENT NUMBER: P96000008472	
The e	enclosed Statement of Change of Registered Office/Age	ent and fee are submitted for filing.
Please	ase return all correspondence concerning this matter to the	e following:
	Marcos A. Guerra, CFO	
	(Name of Contact	Person)
	Pharmed Group Corp.	
(Firm/Company)		
3075 NW 107th Avenue		
	(Address)	
	Miami, Florida 33172	
	(City/State and Zip	Code)
For fu	further information concerning this matter, please call:	
Marc	rcos A. Guerra	(305) 592-2324
	(Name of Contact Person)	(305) 592-2324 (Area Code & Daytime Telephone Number)
r1.	11	500
Encio	losed is a \$35.00 check made payable to the Department	of State.
	Mailing Address: Amendment Section	Street Address:
	Amendment Section Division of Corporations	Amendment Section Division of Corporations
	P.O. Box 6327	Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle
		Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of change	visions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this is submitted for a corporation organized under the laws of the State of Florida
	change its registered office or registered agent, or both, in the State of Florida.
	corporation: Belo Medical Center Purchasing, Inc.
2. The principal offi	ce address: 3075 NW 107th Avenue, Miami, Florida 33172
3. The mailing addre	ess (if different):
4. Date of incorpora	tion/qualification: 11/26/1996 Document number: P96000008472
5. The name and stre Florida Departme	eet address of the current registered agent and registered office on file with the ent of State:
Od	delin Fernandez
30	75 NW 107th Avenue
Mi	ami, FL 33172
6. The name and stre (if changed):	275 NW 107th Avenue Sami, FL 33172 eet address of the new registered agent (if changed) and /or registered office arlos de Cespedes, Jr.
C	arlos de Cespedes, Jr. ່ ່ ກໍ້
30	075 NW 107th Avenue
	(P.O. Box NOT acceptable)
<u>M</u> i	iami, FL 33172
The street address of as changed will be	of its registered office and the street address of the business office of its registered agent, identical.
Such change was a authorized by the b	uthorized by resolution duly adopted by its board of directors or by an officer so oard, or the corporation has been notified in writing of the change.
	Marcos A. Guerra, CFO (Printed or typed name and title)
I hereby accept the I further agree to c of my duties, and I document is being j corporation has be	appointment as registered agent and agree to act in this capacity. omply with the provisions of all statutes relative to the proper and complete performance am familiar with and accept the obligation of my position as registered agent. Or, if this filed merely to reflect a change in the registered office address, I hereby confirm that the en notified in writing of this change.
(Signatu	Te of Registered Agent) 10 09 2007
If signing on behalf	f of an entity: CESPECES, TR. d or Printed Name)
	* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)