## 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P96000012678

Entity Name: NEW MEDICAL GROUP, INC.

FILED Oct 05, 2005 Secretary of State

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

4001 NW 97TH AVE 101 MIAMI, FL 33178

**Current Mailing Address: New Mailing Address:** 

4001 NW 97TH AVE MIAMI, FL 33178

FEI Number: 65-0672086 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

ZAPATA, SANTIAGO ZAPATA, SANTIAGO Z MD, CTR 9779 NW 32ND ST 9779 NW 32ND ST MIAMI, FL 33172 MIAMI, FL 33172

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: SANTIAGO ZAPATA 10/05/2005

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition Title: ( ) Delete Title: ZAPATA, SANTIAGO ZAPATA, SANTIAGO Z MD, CTR Name: Name: 4150 NW 7ST #207A Address: 4150 NW 7ST #207A Address:

City-St-Zip: MIAMI, FL 33126 City-St-Zip: MIAMI, FL 33126

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutés. I further 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 an address, with all other like empowered.

SIGNATURE: SANTIAGO ZAPATA 10/05/2005 DR