

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000020180

Entity Name: SOUTH FLORIDA MEDINVEST, INC.

FILED
Jan 25, 2004
Secretary of State

Current Principal Place of Business:

1097 SW LEJUNE ROAD
2ND FL
CORAL GABLES, FL 33134

New Principal Place of Business:

570 MARQUESA DRIVE
CORAL GABLES, FL 33156

Current Mailing Address:

570 MARQUESA DR.
CORAL GABLES, FL 33156

New Mailing Address:

FEI Number: 65-0653259

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARAN, FERNANDO S
710 S.DIXIE HIGHWAY
CORAL GABLES, FL 33146 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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ARAN, ALBERTO
Address: 570 MARQUESA DR.
City-St-Zip: CORAL GABLES, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR (X) Change () Addition
Name: ARAN, ALBERTO J
Address: 570 MARQUESA DR.
City-St-Zip: CORAL GABLES, FL 33156

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 Statutes. 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: ALBERTO ARAN

PRES

01/25/2004

Electronic Signature of Signing Officer or Director

_____ Date