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Division of Corporations

P.002/004

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# P97000028855

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 205-0380

From:

Account Name : KALKAS BUSINESS SERVICES  
Account Number : I19980000015  
Phone : (305) 577-9716  
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## REGISTERED AGENT CHANGE

MEDIHELP, INC.

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

*Pursuant to the provisions of sections 607.0502, 617.0502 or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of Florida in order to change its registered office or registered agent, or both, in the State of Florida.*

The name of the corporation: **MEDIHELP, Inc.**

2. The principal office address: **6555 NW 36 ST, STE 106 Miami, FL 33166**

3. The mailing address: **as above**

Date of incorporation/qualification: **3/31/97** Document number: **P97000028855**

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

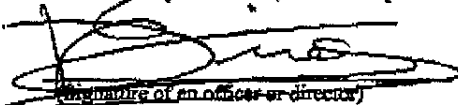
**JOSE M. VEGA  
25 SE 2<sup>ND</sup> AVE. STE 410  
MIAMI, FL 33131**

6. The name and street address of the new registered agent (if changed) and/or registered office (if changed):

**MARTTI KALKAS  
245 SE 1<sup>ST</sup> ST. STE 311  
MIAMI, FL 33131**

The street address of its registered office and the street address of the business office of its registered agent as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
(Signature of an officer or director)

**VALDEVINO DIAS / PRESIDENT**  
(Printed or typed name and title)

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions and all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

  
(Signature of Registered Agent)

**2/10/04**  
(Date)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed or printed name)

\_\_\_\_\_  
(Date)

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