## 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P97000082251

Entity Name: MYOS FINANCIAL GROUP, INC

FILED Jul 18, 2006 Secretary of State

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

2853 EXECUTIVE PARK DRIVE SUITE 105 WESTON, FL 33331

Current Mailing Address: New Mailing Address:

577 SPINNAKER

WESTON, FL 33326

SUITE 105

WESTON, FL 33331

FEI Number: 65-0787420 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SILVA, MARIA A 1433 MAJESTY TERRACE WESTON, FL 33327 US

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

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition Name: SILVA, MARIA A Name: SILVA, MARIA A

Address: 577 SPINNAKER Address: 13857 SW 44TH STREET
City-St-Zip: WESTON, FL 33326 City-St-Zip: DAVIE, FL 33330

Title: P ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 SILVA, ORLANDO J
 Name:
 SILVA, ORLANDO J

 Address:
 577 SPINNAKER
 Address:
 13857 SW 44TH STREET

 City-St-Zip:
 WESTON, FL 33326
 City-St-Zip:
 DAVIE, FL 33330

Title: D (X) Delete Title: ( ) Change ( ) Addition Name: URIBE, LUIS G Name:

 Name:
 URIBE, LUIS G
 Name:

 Address:
 286 RACKET CLUB RD APT 101
 Address:

 City-St-Zip:
 WESTON, FL 33326
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: ORLANDO J SILVA P 07/18/2006