2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000075547

Entity Name: MAXINE MINTO, M.D., INC.

FILED Apr 25, 2007 Secretary of State

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

PO BOX 771090 10524 MOSS PARK RD ORLANDO, FL 32877 ORLANDO, FL 32832

Current Mailing Address: New Mailing Address:

P.O. BOX 771090 10524 MOSS PARK RD ORLANDO, FL 32877 ORLANDO, FL 32832

FEI Number: 59-3530942 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:

 MINTO, MAXINE MD
 MINTO, MAXINE MD

 PO BOX 771090
 10524 MOSS PARK RD

 ORLANDO, FL 32877
 US

 ORLANDO, FL 32832
 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: 04/25/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD () Delete Title: PSTD (X) Change () Addition Name: MINTO, MAXINE J MD Name: MINTO, MAXINE J MD

 Name:
 MINTO, MAXINE J MD
 Name:
 MINTO, MAXINE J MD

 Address:
 PO BOX 771090
 Address:
 10524 MOSS PARK RD

 City-St-Zip:
 ORLANDO, FL 32877
 City-St-Zip:
 ORLANDO, FL 32832

I hereby certify that the information supplied with this filing does not qualify 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: MAXINE MINTO, MD PRES 04/25/2007