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SECRETARY OF STATE

T. Roberts JAN 16 2008

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Red-X Medical Inc. (Name of Corporation)
DOCUMENT NUMBER: P990000 370 >-
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Roberto M. Ureta Esq. (Name of Contact Person)
Roberto M. Vreta P.A.  (Firm/Company)
13360 Sw 128th St. (Address)
Mi Ami Fl. 33186 (City/State and Zip Code)
For further information concerning this matter, please call:
Roberto M. Urcta Esq. at (305) 235-9990 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
statement of change is submitted for a corporation organized under the laws of the State of Florida.
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Red-X Medical Inc.
2. The principal office address: 6110 Sw 33rd Street
Miami Fl. 33155
3. The mailing address (if different): 12973 Sw 112th Street Box # 357
MiAMI, Fl. 33186
4. Date of incorporation/qualification: 1-13-1999 Document number: P9900003702
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Edwin Rivera Ph &
13351 SW 131 Street
Miami, Fl. 33186
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Roberto M. Ureta P.A.
13360 Sw 128th Street
Miami, Fl. 33186
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)  Edwin Rivera 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 of 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.
Fele - 1 m. Elut 1/11/08
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
Roberto M. Ureta
(Typed or Printed Name)

Make Checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
CR2E045 (8/05)

\* \* \* FILING FEE: \$35.00 \* \* \*