2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jul 24, 2006
Secretary of State

DOCUMENT# P99000030232

Entity Name: METROPOLITAN MEDICAL CENTER, INC.

Current Principal Place of Business:

1901 NW 1 STREET
MIAMI, FL 33125

New Principal Place of Business:

Current Mailing Address:

150 NW 32 AVENUE
MIAMI, FL 33125

New Mailing Address:

FEI Number: 65-0908518 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GAZQUEZ, JESUS
1560 SW 139 AVENUE
MIAMI, FL 33184 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

OFFICERS AND DIRECTORS:

Title: PST ( ) Delete
Name: FERNANDEZ, CHEFFY
Address: 150 N.W. 32ND AVENUE
City-St-Zip: MIAMI, FL 33125

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change ( ) Addition
Name: ALFARO, ALEYDA
Address: 140 NW 32 AVENUE
City-St-Zip: MIAMI, FL 33125

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: ALEYDA ALFARO PST 07/24/2006

Electronic Signature of Signing Officer or Director Date