

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000051592

Entity Name: MED-CO CARE, INC.

FILED
Jan 21, 2005
Secretary of State

Current Principal Place of Business:

351 NW 82ND AVE.
SUITE 1103
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 133310
HIALEAH, FL 330130310

New Mailing Address:

FEI Number: 65-0927423

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ORTIZ, KYRENE
7350 SW 11TH ST.
MIAMI, FL 33144 US

Name and Address of New Registered Agent:

YANES, OSCAR
351 NW 82ND AVE.
SUITE 1103
MIAMI, FL 33126 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: OSCAR YANES

01/21/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ORTIZ, KYRENE
Address: 7350 SW 11TH ST.
City-St-Zip: MIAMI, FL 33144 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: YANES, OSCAR
Address: 351 NW 82ND AVE.
City-St-Zip: MIAMI, FL 33126 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: OSCAR YANES

PRES

01/21/2005

Electronic Signature of Signing Officer or Director

Date