2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V06617

FILED Apr 15, 2008 Secretary of State

Entity Name: GYNECOLOGY SPECIALIST, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	BEAUTY DR	RIVE			
SUITE 215 ORLANDO,	FL 32806	US			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	BEAUTY DR	RIVE			
SUITE 215 ORLANDO,	FL 32806	US			
FEI Number: :	59-3099316	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
DIEZ, MAUI 1122 LAKE ORLANDO,	WILLISARA (CIR. US			
The above r in the State		submits this statement for the p	purpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	E:				
	Electron	nic Signature of Registered Ag	ent	Date	
Election Cam	paign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (DIEZ, MAURO 1122 LK WILLI ORLANDO, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: MAURO DIEZ P 04/15/2008