FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90376 010 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

11038541

DOCUMENT # P01000027349

1. Entity Name
MEDCOMP U.S.A., INC.

Principal Place of Business	Mailing Address
~~600 S FEDERAL HWY, SUITE 209~~	~~600 S FEDERAL HWY, SUITE 209~~
~~DEERFIELD BEACH, FL 33441~~	~~DEERFIELD BEACH, FL 33441~~
1350 S. Powerline Rd	P.O. Box 667140
Pompano Bch, FL 33069	Pompano Bch, FL 33066

2. Principal Place of Business	3. Mailing Address
1350 S Powerline Rd	P O Box 667140
Suite, Apt. #, etc. 108	Suite, Apt. #, etc.
City & State: Pompano Bch, FL	City & State: Pompano Bch FL
Zip 33069 Country USA	Zip 33066 Country

☑ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-1097090 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KUS, CEM
600 S FEDERAL HWY, SUITE 209
DEERFIELD BEACH, FL 33441

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ______
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P KUS, CEM 600 S FEDERAL HWY, SUITE 209 DEERFIELD BEACH, FL 33441	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 5947 NW 65 Terr Parkland, FL 33067
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V KUS, JANET 600 S FEDERAL HWY, SUITE 209 DEERFIELD BEACH, FL 33441	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 5947 NW 65 Terr Parkland, FL 33067
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CR2E034 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 04/30/03 954 3258873

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #