

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000012059

**FILED
Nov 30, 2004
Secretary of State**

Entity Name: EQUIMED-USA CORPORATION

Current Principal Place of Business:

5201 BLUE LAGOON DRIVE
540
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

10171 NW 27 STREET
MIAMI, FL 33126

New Mailing Address:

FEI Number: 48-1297720 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SANCHEZ ALERA, IVAN A SR
8701 SW 87 COURT
MIAMI, FL 33173 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MRS () Change (X) Addition
Name: CHASTAIN, LUZ M
Address: 6973 NW 173 TH DRIVE 904
City-St-Zip: MIAMI LAKES, FL 33015 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: LUZ MARY CHASTAIN

MRS

11/30/2004

_____ Electronic Signature of Signing Officer or Director

_____ Date