

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000038737

FILED  
Mar 29, 2010  
Secretary of State

Entity Name: THERAMEDIX, INC.

**Current Principal Place of Business:**

1728 CORPORATE DRIVE  
BOYTON BEACH, FL 33426

**New Principal Place of Business:**

**Current Mailing Address:**

1728 CORPORATE DRIVE  
BOYTON BEACH, FL 33426

**New Mailing Address:**

FEI Number: 20-4822548

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BARON, DANIEL  
1728 CORPORATE DRIVE  
BOYNTON BEACH, FL 33426 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: P/D  
Name: DESTEFANO, LOUIS  
Address: 1728 CORPORATE DRIVE  
City-St-Zip: BOYNTON BEACH, FL 33426

Title: S  
Name: RISKO, DAWN  
Address: 1728 CORPORATE DRIVE  
City-St-Zip: BOYNTON BEACH, FL 33426

Title: T  
Name: BARON, DAN  
Address: 1728 CORPORATE DRIVE  
City-St-Zip: BOYNTON BEACH, FL 33426

I hereby 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 all other like empowered.

SIGNATURE: DAWN RISKO

S

03/29/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date