

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000043920

FILED
Mar 04, 2004
Secretary of State

Entity Name: S.H. MEDICAL CORPORATION

Current Principal Place of Business:

3061 NW 82 AVE
MIAMI, FL 33122

New Principal Place of Business:

Current Mailing Address:

3061 NW 82 AVE
MIAMI, FL 33122

New Mailing Address:

FEI Number: 65-0499670 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALVADE, HECTOR
5701 COLLINS AVE #715
SUITE 101-103
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

SALVADE, HECTOR
5701 COLLINS AVE
715
MIAMI BEACH, FL 33140 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: _____ 03/04/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SALVADE, HECTOR L
Address: 2699 COLLINS AE. #101-103
City-St-Zip: MIAMI BEACH, FL 33140

Title: D () Delete
Name: SALVADE, MARIA E
Address: 2699 COLLINS AE. #101-103
City-St-Zip: MIAMI BEACH, FL 33140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SALVADE, HECTOR L
Address: 3061 NW 82ND. AVE
City-St-Zip: MIAMI, FL 33122

Title: D (X) Change () Addition
Name: SALVADE, MARIA E
Address: 3061 NW 82 AVE.
City-St-Zip: MIAMI, FL 33122

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: HECTOR SALVADE MR 03/04/2004
Electronic Signature of Signing Officer or Director Date