

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000133495

FILED
Apr 30, 2004
Secretary of State

Entity Name: INTELIMED CORP

Current Principal Place of Business:

1035 NE 125 STREET
SUITE 202
MIAMI, FL 33161

New Principal Place of Business:

16300 NE 19 AVE.
SUITE
NORHT MIAMI BEACH, FL 33162

Current Mailing Address:

3616 POLK STREET
#3
HOLLYWOOD, FL 33021

New Mailing Address:

FEI Number: 81-0603090 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCANTLEBURY, DONNA Y
3616 POLK ST.
SUITE 3
HOLLYWOOD, FL 33021

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: PS () Delete
Name: SCANTLEBURY, DONNA Y
Address: 3616 POLK ST. SUITE 3
City-St-Zip: HOLLYWOOD, FL 33021

Title: T () Delete
Name: SCHREIBER, ALAN
Address: 12500 NE 15TH AVE
City-St-Zip: MIAMI, FL 33161

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: SCANTLEBURY, DONNA Y
Address: 3616 POLK ST. #3
City-St-Zip: HOLLYWOOD, FL 33021

Title: VP () Change (X) Addition
Name: LEROY, MICHEL F
Address: 6193 ROCK ISLAND RD. #415
City-St-Zip: TAMARAC, FL 33319

Title: BM () Change (X) Addition
Name: LESS, LENWORTH
Address: 3616 POLK ST. #3
City-St-Zip: HOLLYWOOD, FL 33021

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: DONNA Y. SCANTLEBURY

P

04/30/2004

Electronic Signature of Signing Officer or Director

Date