2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 18, 2005
Secretary of State

DOCUMENT# F01000000300

Entity Name: UNITHER TELEMEDICINE SERVICES CORP.

Current Principal Place of Business:

1110 SPRING STREET
SILVER SPRING, MD 20910

New Principal Place of Business:

Current Mailing Address:

1110 SPRING STREET
SILVER SPRING, MD 20910

New Mailing Address:

FEI Number: 52-2151655 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: FISHER, ANDREW
Address: 1735 CONNECTICUT AVE., NW
City-St-Zip: WASHINGTON, DC 20009

Title: CD ( ) Delete
Name: ROTHBLATT, MARTINE
Address: 1077 HWY A1A
City-St-Zip: SATELLITE BEACH, FL 32937

Title: SD ( ) Delete
Name: MAHON, PAUL A
Address: 1735 CONNECTICUT AVE. NW
City-St-Zip: WASHINGTON, DC 20009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: JOHN FERRARI VP 08/18/2005

Electronic Signature of Signing Officer or Director Date