

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005841

FILED
Mar 28, 2005
Secretary of State

Entity Name: VEINRX INC.

Current Principal Place of Business:

8210 NW 27TH STREET
MIAMI, FL 33122

New Principal Place of Business:

Current Mailing Address:

8210 NW 27TH STREET
MIAMI, FL 33122

New Mailing Address:

FEI Number: 20-0410180

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JAHRMARKT, SCOTT L
8210 NW 27TH STREET
MIAMI, FL 33122 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: DPS () Delete
Name: JAHRMARKT, SCOTT L
Address: 8210 NW 27TH STREET
City-St-Zip: MIAMI, FL 33122

Title: DVP () Delete
Name: SLATER, CHARLES R
Address: 8210 NW 27TH STREET
City-St-Zip: MIAMI, FL 33122

Title: D () Delete
Name: LIN, RICHARD
Address: 8210 N. W. 27 STREET
City-St-Zip: MIAMI, FL 33122

Title: D () Delete
Name: COLLINSON, JEFFREY
Address: 8210 N. W. 27 STREET
City-St-Zip: MIAMI, FL 33122

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:

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: SCOTT JAHRMARKT

DPS

03/28/2005

Electronic Signature of Signing Officer or Director

_____ Date