2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 16, 2007
Secretary of State

DOCUMENT# F05000002554

Entity Name: MEDICAL MULTIPLEX, INC.

Current Principal Place of Business:	**New Principal Place of Business:**
4165 WESTPORT ROAD, SUITE 204 LOUISVILLE, KY 40207	4500 BOWLING BLVD SUITE 200 LOUISVILLE, KY 40207

Current Mailing Address:	**New Mailing Address:**
4165 WESTPORT ROAD, SUITE 204 LOUISVILLE, KY 40207	4500 BOWLING BLVD SUITE 200 LOUISVILLE, KY 40207

FEI Number: 61-1269242 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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: ______________________________
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:		**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**	
Title:	P ( ) Delete	Title:	CEO (X) Change ( ) Addition
Name:	MUELLER, MICHAEL J	Name:	PATRICK, JAMES E
Address:	4165 WESTPORT ROAD, SUITE 204	Address:	6400 CONGRESS AVENUE SUITE 2200
City-St-Zip:	LOUISVILLE, KY 40207	City-St-Zip:	BOCA RATON, FL 33487
Title:	VCFO ( ) Delete	Title:	CFO (X) Change ( ) Addition
Name:	RONALD, PETER W	Name:	TYLER, JAMES M
Address:	4165 WESTPORT ROAD, SUITE 204	Address:	6400 CONGRESS AVENUE SUITE 2200
City-St-Zip:	LOUISVILLE, KY 40207	City-St-Zip:	BOCA RATON, FL 33487
Title:	VP ( ) Delete	Title:	SEC (X) Change ( ) Addition
Name:	WOOD, JOHN S	Name:	MALSAM, GEORGE
Address:	116 E FRENCH PL	Address:	6400 CONGRESS AVENUE SUITE 200
City-St-Zip:	SAN ANTONIO, TX 78212	City-St-Zip:	BOCA RATON, FL 33487
Title:	VP (X) Delete	Title:	( ) Change ( ) Addition
Name:	CASANOVA, ROBERTO D	Name:	
Address:	6303 WALNUT RIDGE TR	Address:	
City-St-Zip:	PROSPECT, KY 40059	City-St-Zip:	
Title:	VP (X) Delete	Title:	( ) Change ( ) Addition
Name:	SHAPIRO, STEVEN	Name:	
Address:	6411 LIMERIDGE PLACE	Address:	
City-St-Zip:	LOUISVILLE, KY 40222	City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JAMES M TYLER CFO 08/16/2007
Electronic Signature of Signing Officer or Director Date