

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000004107

FILED  
Mar 30, 2010  
Secretary of State

Entity Name: PRO2MED, INC.

**Current Principal Place of Business:**

2131 PALOMAR AIRPORT ROAD STE 350  
CARLSBAD, CA 92011

**New Principal Place of Business:**

**Current Mailing Address:**

8050 N UNIVERSITY DR STE 202  
TAMARAC, FL 33321

**New Mailing Address:**

FEI Number: 26-3258733

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PIERSON, THOMAS F  
8050 N. UNIVERSITY DR STE 202  
TAMARAC, FL 33321 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: C  
Name: GRIFFITHS, MICHAEL  
Address: 2131 PALOMAR AIRPORT ROAD STE 350  
City-St-Zip: CARLSBAD, CA 92011

Title: VCP  
Name: PLIHAL, KEVIN  
Address: 2131 PALOMAR AIRPORT ROAD STE 350  
City-St-Zip: CARLSBAD, CA 92011

Title: DST  
Name: MULLER, RICHARD  
Address: 8050 N UNIVERSITY DR STE 202  
City-St-Zip: TAMARAC, FL 33321

Title: D  
Name: HAUSLER, RENE  
Address: 8050 N UNIVERSITY DR STE 202  
City-St-Zip: TAMARAC, FL 33321

I hereby 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 all other like empowered.

SIGNATURE: RICHARD MULLER

DST

03/30/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date