

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000006714

FILED
Jul 27, 2004
Secretary of State

Entity Name: INFIMED, INC.

Current Principal Place of Business:

121 METROPOLITAN DR.
LIVERPOOL, NY 13088

New Principal Place of Business:

Current Mailing Address:

121 METROPOLITAN DR.
LIVERPOOL, NY 13088

New Mailing Address:

FEI Number: 11-2932413

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SHOENFELD, NORMAN
Address: 1000 W. PENNSYLVANIA AVE.
City-St-Zip: PEN ARGYL, PA 18072

Title: P () Delete
Name: FLEMING, BRIAN
Address: 4095 CORTINA ROAD
City-St-Zip: BALDWINVILLE, NY 13027

Title: V () Delete
Name: RYAN, AMY
Address: 5016 SURREY DRIVE
City-St-Zip: SYRACUSE, NY 13215

Title: S () Delete
Name: SHOENFELD, DIANE
Address: PO BOX 24142
City-St-Zip: SARATOGA, CA 95071

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: V (X) Change () Addition
Name: RYAN, AMY
Address: 4186 SUMMIT VIEW
City-St-Zip: MARCELLUS, NY 13108

Title: S (X) Change () Addition
Name: SHOENFELD, DIANE
Address: PO BOX 24142
City-St-Zip: SANTA FE, NM 87502

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: AMY RYAN

V

07/27/2004

Electronic Signature of Signing Officer or Director

_____ Date