

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G27321

FILED
Mar 18, 2011
Secretary of State

Entity Name: INTERNATIONAL MEDICAL STUDENT DEVELOPMENT, INC.

Current Principal Place of Business:

CHARLES R. MODICA
454 SO. BEACH ROAD
HOBE SOUND, FL 33455 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 7351
DELRAY BEACH, FL 33445 US

New Mailing Address:

FEI Number: 59-2288953 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MODICA, CHARLES R
454 SO. BEACH RD.
HOBE SOUND, FL 33455 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

OFFICERS AND DIRECTORS:

Title: DP
Name: MODICA, CHARLES R
Address: P.O. BOX 3947 N/A
City-St-Zip: BOYNTON BEACH, FL

Title: DS
Name: MODICA, JOHN
Address: P.O. BOX 3947 N/A
City-St-Zip: BOYNTON BEACH, FL

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: CHARLES R. MODICA

DP

03/18/2011

Electronic Signature of Signing Officer or Director

Date