2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2005
Secretary of State

DOCUMENT# P00000040402

Entity Name: INTEGRATIVE HEALTHCARE, INC.

Current Principal Place of Business:

1913 BUFORD BLVD
TALLAHASSEE, FL 32308 US

New Principal Place of Business:

Current Mailing Address:

1913 BUFORD BLVD.
TALLAHASSEE, FL 32308

New Mailing Address:

FEI Number: 59-3640137 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARKOVICH, NANCY E
1308 BETTON RD.
TALLAHASSEE, FL 32312 US

Name and Address of New Registered Agent:

MARKOVICH, NANCY E
1308 BETTON RD.
TALLAHASSEE, FL 323208 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: _____ 01/29/2005
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PS ( ) Delete
Name: MARKOVICH, NANCY E
Address: 1308 BETTON RD.
City-St-Zip: TALLAHASSEE, FL 32308

Title: VT ( ) Delete
Name: MARKOVICH, MARTIN
Address: 1308 BETTON RD.
City-St-Zip: TALLAHASSEE, FL 32308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: NANCY ELIZABETH MARKOVICH PRES 01/29/2005
Electronic Signature of Signing Officer or Director — Date