

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000054147

FILED
Apr 23, 2004
Secretary of State

Entity Name: CORALMED.COM, INCORPORATED

Current Principal Place of Business:

P.O. BOX 622048
OVIEDO, FL 327622048

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 622048
OVIEDO, FL 327622048

New Mailing Address:

FEI Number: 59-3647175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRIZ, MARK
584 YORKSHIRE DRIVE
OVIEDO, FL 32765 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: GRIZ, MARK
Address: 584 YORKSHIRE DRIVE
City-St-Zip: OVIEDO, FL 32765

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MARK T. GRIZ

Electronic Signature of Signing Officer or Director

PRES

04/23/2004

Date