

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000054994

FILED  
Jan 17, 2004  
Secretary of State

Entity Name: MILLENNIUM MEDICAL RECORDS CONSULTANTS, INC.

## Current Principal Place of Business:

11570 WILES ROAD  
1  
CORAL SPRINGS, FL 33065

## Current Mailing Address:

10836 NW 34TH COURT  
CORAL SPRINGS, FL 33065

## New Principal Place of Business:

11570 WILES ROAD  
#1  
CORAL SPRINGS, FL 33076

## New Mailing Address:

11570 WILES ROAD  
#1  
CORAL SPRINGS, FL 33076

FEI Number: 65-1076804

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

POTERE, LINDA K  
10836 NW 34TH COURT  
CORAL SPRINGS, FL 33065

## 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: POTERE, LINDA K  
Address: 10836 NW 34TH COURT  
City-St-Zip: CORAL SPRINGS, FL 33065

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: POTERE, LINDA K  
Address: 10836 NW 34TH COURT  
City-St-Zip: CORAL SPRINGS, FL 33065

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: LINDA K. POTERE

PRES

01/17/2004

Electronic Signature of Signing Officer or Director

Date