

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000081536

FILED  
Apr 19, 2004  
Secretary of State

**Entity Name:** INTERNATIONAL MEDICAL COLLABORATIVE, INC.

**Current Principal Place of Business:**

5400 SOUTH UNIVERSITY DRIVE  
SUITE 405  
DAVIE, FL 33328

**New Principal Place of Business:**

**Current Mailing Address:**

5400 SOUTH UNIVERSITY DRIVE  
SUITE 405  
DAVIE, FL 33328

**New Mailing Address:**

PO BOX 293156  
DAVIE, FL 33329 US

**FEI Number:** 65-1038239

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HERNANDEZ, FRANK C  
5400 S UNIVERSITY DR #405  
FORT LAUDERDALE, FL 33328 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: PD ( ) Delete  
Name: HERNANDEZ, FRANK C  
Address: 5400 SOUTH UNIVERSITY DRIVE SUITE 405  
City-St-Zip: DAVIE, FL 33328

**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:** FRANK C. HERNANDEZ

PD

04/19/2004

Electronic Signature of Signing Officer or Director

Date