

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000090590

FILED
May 02, 2003
Secretary of State

Entity Name: INNOVATIVE MEDICAL GROUP, INC.

Current Principal Place of Business:

590 SW 178TH WAY
PEMBROKE PINES, FL 33029

New Principal Place of Business:

601 N. FLAMINGO RD
206A
PEMBROKE PINES, FL 33028

Current Mailing Address:

590 SW 178TH WAY
PEMBROKE PINES, FL 33029

New Mailing Address:

FEI Number: 65-1057519

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRIEDMAN, STEVEN
235 NORTH UNIVERSITY DRIVE
PEMBROKE PINES, FL 33024 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: ZARAGOZA, MARCOS
Address: 590 SW 178TH WAY
City-St-Zip: PEMBROKE PINES, FL 33029

Title: D (X) Delete
Name: SVAYG, INA
Address: 500 THREE ISLAND BLVD BLVD A APT 322
City-St-Zip: HALLANDALE, FL 33009

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: MARCOS ZARAGOZA

DR

05/02/2003

Electronic Signature of Signing Officer or Director

Date