

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000006252

FILED
Apr 30, 2007
Secretary of State

Entity Name: INTEGRAL MEDICINE GROUP INC.

Current Principal Place of Business:

760 PONCE DE LEON BLVD
SUITE 107
CORAL GABLES, FL 33134

New Principal Place of Business:

7500 SW 8 ST
SUITE 303
MIAMI, FL 33144

Current Mailing Address:

PO BOX 111570
HIALEAH, FL 330111570

New Mailing Address:

FEI Number: 65-1090161

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HERNANDEZ, CAROLINA
760 PONCE DE LEON BLVD
SUITE 107
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

HERNANDEZ, CAROLINA
7500 SW 8 ST
SUITE 303
MIAMI, FL 33144 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: CAROLINA C HERNANDEZ

04/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HERNANDEZ, HUMBERTO J MD
Address: 760 PONCE DE LEON BLVD SUITE 107
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HERNANDEZ, HUMBERTO J MD
Address: 7500 SW 8 ST SUITE 303
City-St-Zip: MIAMI, FL 33144

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: HUMBERTO J HERNANDEZ

D

04/30/2007

Electronic Signature of Signing Officer or Director

Date