


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 02, 2004 8:00 am
Secretary of State

07-02-2004 90002 030 ***150.00

DOCUMENT # P02000010764	
1. Entity Name QUALITY MED TRANSCRIPTION, INC.	

Principal Place of Business 5545 BERRY BLOSSOM WAY WEST WEST PALM BEACH, FL 33415	Mailing Address 5545 BERRY BLOSSOM WAY WEST WEST PALM BEACH, FL 33415
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54059624



2. Principal Place of Business 22747 Neptune Rd Suite, Apt. #, etc.	3. Mailing Address 309 SW Crestview Dr Suite, Apt. #, etc.
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06232004 Chg-P CR2E034 (10/03)

City & State Boca Raton, FL	City & State Grain Valley, MO
Zip 33428	Zip 64029
Country USA	Country USA

4. FEI Number APPLIED FOR	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent SPOCK, JANET L 5545 BERRY BLOSSOM WAY WEST WEST PALM BEACH, FL 33415

7. Name and Address of New Registered Agent Name SPOCK, Janet L. Street Address (P.O. Box Number is Not Acceptable) 22747 Neptune Rd City Boca Raton FL Zip Code 33428

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Janet L Spock (NOTE: Registered Agent signature required when reinstating) DATE 6-21-04

FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES SPOCK, JANET L 5545 BERRY BLOSSOM WAY WEST WEST PALM BEACH, FL 33415 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SPOCK, Janet L 22747 Neptune Rd Boca Raton, FL 33428 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC SPOCK, JANET L 5545 BERRY BLOSSOM WAY WEST WEST PALM BEACH, FL 33415 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Janet L Spock DATE 6-21-04 TELEPHONE 816-729-3282