

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000026743

FILED
Apr 28, 2011
Secretary of State

Entity Name: MEDICAL EVALUATORS, INC.

Current Principal Place of Business:

406 WEST 19TH STREET
PANAMA CITY, FL 32405

New Principal Place of Business:

Current Mailing Address:

406 WEST 19TH STREET
PANAMA CITY, FL 32405

New Mailing Address:

FEI Number: 03-0406301

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUI, THUY T
406 WEST 19TH STREET
PANAMA CITY, FL 32405 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

OFFICERS AND DIRECTORS:

Title: P
Name: BUI, HAI
Address: 411 LANDINGS DR.
City-St-Zip: PANAMA CITY, FL 32405

Title: VP
Name: BUI, THUY T
Address: 103 FLEMING COURT
City-St-Zip: LYNN HAVEN, FL 32444

Title: ST
Name: NGUYEN, THAO V
Address: 103 FLEMING COURT
City-St-Zip: LYNN HAVEN, FL 32444

I hereby 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 all other like empowered.

SIGNATURE: THUY BUI

VP

04/28/2011

Electronic Signature of Signing Officer or Director

Date