

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000091558

Entity Name: HEMEVA, INC

FILED  
Feb 10, 2005  
Secretary of State

## Current Principal Place of Business:

16300 NE 19 AVE STE C  
N MIAMI BCH, FL 33162

## New Principal Place of Business:

## Current Mailing Address:

16300 NE 19 AVE STE C  
N MIAMI BCH, FL 33162

## New Mailing Address:

FEI Number: 35-2178884

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SILVA, FERNANDO  
16300 NE 19 AVE STE C  
N MIAMI BCH, FL 33162 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: MEDINA, HENRY H  
Address: 16300 19 AVE STE C  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: VPD ( ) Delete  
Name: MEDINA, LUCILA E  
Address: 16300 19 AVE STE C  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: SD ( ) Delete  
Name: MEDINA, DANIEL H  
Address: 16300 19 AVE STE C  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: D ( ) Delete  
Name: MEDINA, NELSON A  
Address: 16300 19 AVE STE C  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: D ( ) Delete  
Name: MEDINA, HENRY F  
Address: 16300 19 AVE STE C  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: TD ( ) Delete  
Name: MEDINA, ANA M  
Address: 16300 NE 19 AVE STE C  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: MEDINA, HENRY F  
Address: 16300 19 AVE STE C  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

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: HENRY MEDINA

PD

02/10/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date