

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000098199

Entity Name: HEALTHMED GROUP, INC.

FILED
May 17, 2005
Secretary of State

Current Principal Place of Business:

7805 SW 24TH STREET
SUITE 105
MIAMI, FL 33155

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 442869
MIAMI, FL 33144

New Mailing Address:

FEI Number: 54-2075781

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOURE-DOMECQ, ELENA ESQ
9260 SUNSET DRIVE
SUITE 205
MIAMI, FL 33173 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: PD () Delete
Name: DIAZ, ISABELLE
Address: 7805 SW 25TH STREET, SUITE 105
City-St-Zip: MIAMI, FL 33155

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HERNANDEZ, JEFFREY
Address: 7805 CORAL WAY, SUITE 103
City-St-Zip: MIAMI, FL 33155

Title: DVP () Change (X) Addition
Name: REGALADO, RICARDO L
Address: 7805 CORAL WAY, SUITE 103
City-St-Zip: MIAMI, FL 33155

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: JEFFREY HERNANDEZ

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05/17/2005

Electronic Signature of Signing Officer or Director

Date