

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000108407

Entity Name: HUNGERFORD MEDICAL, INC.

FILED
Jul 02, 2007
Secretary of State

Current Principal Place of Business:

7797 N UNIVERSITY DR
101
TAMARAC, FL 33321 US

Current Mailing Address:

8860 NW 78 COURT #368
TAMARAC, FL 33321 US

New Principal Place of Business:

8860 NW 78 COURT
368
TAMARAC, FL 33321 US

New Mailing Address:

8860 NW 78 COURT
#368
TAMARAC, FL 33321 US

FEI Number: 52-2385799

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUNGERFORD, IQLIA
8860 NW 78 COURT #368
TAMARAC, FL 33321 US

Name and Address of New Registered Agent:

HUNGERFORD, IQLIA
8860 NW 78 COURT
#368
TAMARAC, FL 33321 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:

07/02/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDTS () Delete
Name: HUNGERFORD, IQLIA
Address: 8860 NW 78 CRT. #368
City-St-Zip: TAMARAC, FL 33321

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: IQLIA HUNGERFORD

PRES

07/02/2007

Electronic Signature of Signing Officer or Director

Date