


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 11, 2005 8:00 am
Secretary of State

08-11-2005 90001 010 ***150.00

DOCUMENT # P02000108894

1. Entity Name
REXIMED INCORPORATED



Principal Place of Business
 1221 BRICKELL AVENUE
 SUITE 900
 MIAMI, FL 33131

Mailing Address
 1990 BRICKELL AVENUE
 UNIT H
 MIAMI, FL 33129

50060941



08052005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
 16-1632058

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

MIGOYA, RONALD J
 1990 BRICKELL AVENUE
 UNIT H
 MIAMI, FL 33129

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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: *Ronald Migoya* DATE: 8/5/05

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$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.

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	MIGOYA, RONALD J
STREET ADDRESS	1990 BRICKELL AVENUE UNIT H
CITY - ST - ZIP	MIAMI, FL 33129
TITLE	VP
NAME	NARCISO, ANABELLA
STREET ADDRESS	1990 BRICKELL AVENUE UNIT H
CITY - ST - ZIP	MIAMI, FL 33129
TITLE	D
NAME	NARCISO, MAURA
STREET ADDRESS	1990 BRICKELL AVENUE UNIT H
CITY - ST - ZIP	MIAMI, FL 33129
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

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: *Ronald Migoya* DATE: 8/5/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR