

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000038494

FILED
May 02, 2005
Secretary of State

Entity Name: PRO-MED HEALTH NETWORK, INC.

Current Principal Place of Business:

885 N. POWERS DRIVE
SUITE B
ORLANDO, FL 32818

New Principal Place of Business:

1130 S SEMORAN BLVD
SUITE B
ORLANDO, FL 32807

Current Mailing Address:

885 N. POWERS DRIVE
SUITE B
ORLANDO, FL 32818

New Mailing Address:

1130 S SEMORAN BLVD
SUITE B
ORLANDO, FL 32807

FEI Number: 20-0035458

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA, JORGE LUIS
4775 COLLINS AVE., PH 4107
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

GARCIA, JORGE LUIS
4779 COLLINS AVENUE
PH 4107
MIAMI BEACH, FL 33140 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: JORGE L GARCIA

05/02/2005

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: CEOP () Delete
Name: GARCIA, JORGE L
Address: 4775 COLLINS AVE., PH 4107
City-St-Zip: MIAMI BEACH, FL 33140

Title: D () Delete
Name: GARCIA, JORGE L
Address: 4775 COLLINS AVE., PH 4107
City-St-Zip: MIAMI BEACH, FL 33140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEOP (X) Change () Addition
Name: GARCIA, JORGE L
Address: 4779 COLLINS AVE., PH 4107
City-St-Zip: MIAMI BEACH, FL 33140

Title: PD (X) Change () Addition
Name: GARCIA, JORGE L
Address: 4779 COLLINS AVE., PH 4107
City-St-Zip: MIAMI BEACH, FL 33140

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: JORGE L GARCIA

PD

05/02/2005

Electronic Signature of Signing Officer or Director

Date