2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 14, 2004 8:00 am Secretary of State 04-02-2004 90043 006 ***150.00

DOCUMENT # P03000077149 1. Entity Name AMERICAN JOURNAL OF BALANCE MEDICINE, INC.							04-02-2004	4 90043	0061	30.00
Principal Place	e of Business	•	Mailing Address		•					
3728 PHILIPS	S HIGHWAY		3728 PHILIPS HIGHWAY				6641	1576		
SUITE 31			SUITE 31			Į	0012	,	per paret	•
JACKSONVILL	E, FL 32207		JACKSONVILLE, FL 322	207				11 MD211 180H 180	6: 9:011 0:010 1:01	
2. Principal Place of Business			3. Malling Address				. 11.11, 11.11, 11. 11, 11.11, 11.11		KI UNI DINI IK	
Suite, Apt. #, etc.			Suite, Apt. #, etc.			03182004	Chg-P	CR2E03	34 (10/03)	
City & State		City & State			4. FEI Numbe	·-2125	700		plied For Applicable	
Zip		Country	Zip	Country	,				\$8.75 Add	
		ա -ը,	<u> </u>			5. Certificate	of Status Desired		Pee Required	1
	6. Name and	Address of Current F	legistered Agent			7. Name and	Address of New R	egistered A	gent	
					Name	خ بد	g www.		19 g	
	WARD C			-	Street Address (P.O. Box Number is Not Acceptable)					
	NDENT DRIV	/E		- 1	Street Address (P.O. Box Numb	er is Not Acceptable	3)		1
SUITE 2301										
JACKSON	VILLE, FL 32	2202		<u> </u>						
					City			FL	Zip Code	•
R The shove	named entity su	hmite this statement for	the purpose of changing its	registered	office or register	red agent or ho	th in the State of Ek		emiliar with	end accept
	ions of registered		the builtood of chariging its	icgistered	Once of register	eu agent, or bu	ar, ar and State Of Fa	AICIO. I AITT	COLUMNIA ANTON	and accept
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SIGNATURE_	~		*, *.					DATE		
	Signature, typed or pr	inted name of registered agent a	nature in appricable. (MUII)	: Hegistered #	gent eignature required	Multi (Milatemia)	· · · · · · · · · · · · · · · · · · ·	- DATE		
FILE NOWIN FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. Added									•	
10.		OFFICERS AND	DIRECTORS	11.		ADDITIONS	CHANGES TO OFF	ICERS AND	DIRECTORS	SIN 11
TITLE	D		☐ Delete	TITLE			_		☐ Change	☐ Addition
NAME	GREEN, JACOB M.D.			NAME	1					
STREET ADDRESS	STREET ADDRESS 3728 PHILIPS HIGHWAY #31				I					
CITY-ST-ZIP	1	S HIGHWAY #31			ADDRESS					
	1	S HIGHWAY #31 LLE, FL 32207		STREET CITY-S						
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TITLE NAME	1		☐ Delete	cmy-s				·	Change	☐ Addition
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