

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000085939

FILED  
Sep 20, 2004  
Secretary of State

Entity Name: MED SERVICES OF SOUTH FLORIDA, CORP.

## Current Principal Place of Business:

8340 NW 10 ST SUITE 6  
MIAMI, FL 33126

## New Principal Place of Business:

8357 W FLALGER ST  
344  
MIAMI, FL 33144

## Current Mailing Address:

8340 NW 10 ST SUITE 6  
MIAMI, FL 33126

## New Mailing Address:

8357 W FLAGLER ST  
344  
33144, FL 33126

FEI Number: 20-0134186

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BONET, NELSON  
8340 NW 10 ST SUITE 6  
MIAMI, FL 33126

## Name and Address of New Registered Agent:

BONET, NELSON  
8357 W FLAGLER ST  
344  
MIAMI, FL 33144

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: NELSON BONET

09/20/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: BONET, NELSON  
Address: 8340 NW 10 ST SUITE 6  
City-St-Zip: MIAMI, FL 33126

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: BONET, NELSON  
Address: 8357 W FLAGLER ST #344  
City-St-Zip: MIAMI, FL 33144

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: NELSON BONET

P

09/20/2004

Electronic Signature of Signing Officer or Director

Date