2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000105829

Address:

City-St-Zip:

Entity Name: INTERNATIONAL MED. MANAGEMENT, CORP.

FILED Apr 27, 2004 Secretary of State

Current P	rincipal Plac	e of Business:	New Principal Pl	New Principal Place of Business:	
10613 HAMMOCKS BOULEVARD SUITE #223 MIAMI, FL 33196			10661 N. KENDAL SUITE #232 MIAMI, FL 33176		
Current N	lailing Addre	ess:	New Mailing Add	New Mailing Address:	
10613 HAMMOCKS BOULEVARD SUITE #223 MIAMI, FL 33196			10661 N. KENDAL SUITE #232 MIAMI, FL 33176		
FEI Number	: 43-2049173	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
		ULEVARD			
	e named entity e of Florida.	submits this statement for the	purpose of changing its regis	tered office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered A	gent	Date	
Election Ca	mpaign Financii	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	RAMIREZ, RA	OCKS BOULEVARD, SUITE 223	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D (ABREU, ARTU) Delete JRO	Title: Name:	() Change () Addition	

Address:

City-St-Zip:

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: RAMIRO A RAMIREZ D 04/27/2004

10613 HAMMOCKS BOULEVARD, SUITE 223

MIAMI, FL 33196