

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000114462

Entity Name: EMPOWER MED, INC.

FILED  
Feb 12, 2006  
Secretary of State

## Current Principal Place of Business:

6601 SW 80TH STREET  
SUITE 101-108  
SOUTH MIAMI, FL 33143 US

## New Principal Place of Business:

## Current Mailing Address:

6601 SW 80TH STREET  
SUITE 101-108  
SOUTH MIAMI, FL 33143 US

## New Mailing Address:

2883 SUMAC DRIVE  
ATLANTA, GA 30360 US

FEI Number: 05-0599026

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AUGSTEN, EDUARDO  
6601 SW 80TH STREET  
SUITE 101-108  
SOUTH MIAMI, FL 33143 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete  
Name: AUGSTEN, EDUARDO  
Address: 6601 SW 80 STREET, SUITE 101-108  
City-St-Zip: SOUTH MIAMI, FL 33143

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: EDUARDO AUGSTEN

PSTD

02/12/2006

Electronic Signature of Signing Officer or Director

Date