2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2005
Secretary of State

DOCUMENT# P03000117869

Entity Name: REMISE OCCUPATIONAL HEALTH SOLUTIONS, INC.

Current Principal Place of Business:

638 E TARPON AVE.
TARPON SPRINGS, FL 34689

New Principal Place of Business:

Current Mailing Address:

638 E TARPON AVE.
TARPON SPRINGS, FL 34689

New Mailing Address:

FEI Number: 27-0069430 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KLIMIS, GEORGE N
27 EAST ORANGE STREET
TARPON SPRINGS, FL 34689 US

Name and Address of New Registered Agent:

WENDY, PARACKA
638 E TARPON SPRINGS
TARPON SPRINGS, FL 34689 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: WENDY PARACKA 04/13/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: PARACKA, WENDY
Address: 4433 SPRING LAKE COURT
City-St-Zip: NEW PORT RICHEY, FL 34652

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 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: WENDY PARACKA PRES 04/13/2005
Electronic Signature of Signing Officer or Director Date