2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004
Secretary of State

DOCUMENT# P03000119623

Entity Name: MEGA MEDIC USA,INC

Current Principal Place of Business:

1107 E. HALLANDALE BEACH BLV.
HALLANDALE BEACH, FL 33009 US

New Principal Place of Business:

16383 NW 57TH AVENUE
MIAMI, FL 33014 US

Current Mailing Address:

1107 E. HALLANDALE BEACH BLV.
HALLANDALE BEACH, FL 33009 US

New Mailing Address:

16383 NW 57TH AVENUE
MIAMI, FL 33014 US

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BURKLE, MERY M
1107 E. HALLANDALE BEACH BLV.
HALLANDALE BEACH, FL 33009 US

Name and Address of New Registered Agent:

BURKLE, MERY M
16383 NW 57TH AVENUE
MIAMI, FL 33014 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: MERY M. BURKLE 04/28/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: BURKLE, GUSTAVO A
Address: 1107 E. HALLANDALE BEACH BLV.
City-St-Zip: HALLANDALE BEACH, FL 33009 US

Title: VP ( ) Delete
Name: BURKLE, MERY M
Address: 1107 E. HALLANDALE BEACH BLV.,
City-St-Zip: HALLANDALE BEACH, FL 33009 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: BURKLE, GUSTAVO A
Address: 16383 NW 57TH AVENUE
City-St-Zip: MIAMI, FL 33014 US

Title: VP (X) Change ( ) Addition
Name: BURKLE, MERY M
Address: 16383 NW 57TH AVENUE
City-St-Zip: MIAMI, FL 33014 US

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: MERY M. BURKLE VP 04/28/2004
Electronic Signature of Signing Officer or Director Date