2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000144563

FILED Mar 07, 2004 Secretary of State

	ile. INTERNATI	ONAL BOARD OF MEDICIN	IE AND SURGERY, I	NC.		
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
136 36 AV ST. PETER	ENUE NE RSBURG, FL 33	704				
Current Mailing Address:			New Maili	New Mailing Address:		
P.O. BOX PALM HAF	6009 RBOR, FL 34684					
FEI Number		FEI Number Applied For (X)	FEI Number Not Appl	icable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
DWYER, F 136 36 AV ST. PETEF		704 US				
	named entity sub e of Florida.	omits this statement for the p	ourpose of changing i	ts registered	office or registered agent, or	ooth,
	e of Florida. É	·		ts registered		ooth,
in the State	e of Florida. RE: Electronic	omits this statement for the positions of Registered Agentus Fund Contribution ().		ts registered	office or registered agent, or Date	ooth,
in the State SIGNATUR	e of Florida. RE: Electronic	Signature of Registered Agerust Fund Contribution ().	ent			
in the State SIGNATUR	e of Florida. RE: Electronic mpaign Financing T	Signature of Registered Age rust Fund Contribution (). PRS: Plete	ent	S/CHANGE DR KALIN, DAVII	Date S TO OFFICERS AND DIREC (X) Change () Addition O P MINGTON DR.	

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: DAVID P KALIN DR 03/07/2004