

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000018121

FILED
Jan 16, 2005
Secretary of State

Entity Name: INGENIUM HEALTHCARE SYSTEMS, INC.

Current Principal Place of Business:

13000 CORONADO DR.
NORTH MIAMI, FL 33181 US

New Principal Place of Business:

Current Mailing Address:

13000 CORONADO DR.
NORTH MIAMI, FL 33181 US

New Mailing Address:

FEI Number: 20-0643687

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALMOND, DANA H
13000 CORONADO DR.
NORTH MIAMI, FL 33181 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: P () Delete
Name: ALMOND, CHRIS S
Address: 13000 CORONADO DR.
City-St-Zip: NORTH MIAMI, FL 33181

Title: VP () Delete
Name: NICHOLS, KENNETH D
Address: 4799 OAK CIR.
City-St-Zip: BOYNTON BEACH, FL 33436

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: CHRIS ALMOND

PRES

01/16/2005

Electronic Signature of Signing Officer or Director

Date