

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000020257

FILED
Apr 07, 2005
Secretary of State

Entity Name: ISIS MEDICAL SERVICES , INC

Current Principal Place of Business:

8045 NW 36TH ST., SUITE #530
MIAMI, FL 33166

New Principal Place of Business:

8045 NW 36TH ST
530
MIAMI, FL 33166

Current Mailing Address:

8045 NW 36TH ST., SUITE #530
MIAMI, FL 33166

New Mailing Address:

8045 NW 36TH ST
530
MIAMI, FL 33166

FEI Number: 38-3696638

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MULLALES, HENRY
4122 SW 148 PATH
MIAMI, FL 33185 US

Name and Address of New Registered Agent:

VALLADARES, CARIDAD M
8045 NW 36TH ST
530
MIAMI, FL 33166 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: CARIDAD M VALLADARES

04/07/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MULLALES, HENRY
Address: 4122 SW 148 PATH
City-St-Zip: MIAMI, FL 33185

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: VALLADARES, CARIDAD M
Address: 8045 NW 36TH ST, SUITE 530
City-St-Zip: MIAMI, FL 33166

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: CARIDAD M VALLADARES

P

04/07/2005

Electronic Signature of Signing Officer or Director

Date