## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000030652

Address:

City-St-Zip:

Entity Name: E-MEDSEARCH CORPORATION

7250 SW 142ND TERRACE

MIAMI, FL 33158

FILED Apr 26, 2005 Secretary of State

Current P	rincipal Place of Business:	New Principal Pla	New Principal Place of Business:	
7250 SW MIAMI, FL	142ND TERRACE 33158			
Current Mailing Address:		New Mailing Add	New Mailing Address:	
7250 SW MIAMI, FL	142ND TERRACE 33158			
FEI Number	: FEI Number Applied	FEI Number Not Applicable (X	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:		Agent: Name and Addres	Name and Address of New Registered Agent:	
2701 S. BA SUITE 402	R, SCOTT M ESQ. AYSHORE DRIVE 2 T GROVE, FL 33133 US			
	named entity submits this stateme e of Florida.	ent for the purpose of changing its regist	ered office or registered agent, or both,	
SIGNATU	RE:			
	Electronic Signature of Reg	istered Agent	Date	
Election Ca	mpaign Financing Trust Fund Contribut	ion ( ).		
OFFICERS AND DIRECTORS:		ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PST () Delete ELASIK, JENNIFER 7250 SW 142ND TERRACE MIAMI, FL 33158	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name:	VD ( ) Delete ELASIK, JENNIFER	Title: Name:	( ) Change ( ) Addition	

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: JENNIFER ELASIK PST 04/26/2005