

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000067764

FILED
May 04, 2005
Secretary of State

Entity Name: BISMARK MEDICAL SERVICES, INC.

Current Principal Place of Business:

26 WESTWARD DR
MIAMI SPRINGS, FL 33166

New Principal Place of Business:

Current Mailing Address:

26 WESTWARD DR
MIAMI SPRINGS, FL 33166

New Mailing Address:

FEI Number: 20-1062655

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEREA, YVETTE
400 SW 69 AVE.
MIAMI, FL 33144 US

Name and Address of New Registered Agent:

PEREA, YVETTE
26 WESTWARD DRIVE
MIAMI SPRINGS, 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: YVETTE PEREA

05/04/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVST () Delete
Name: PEREA, YVETTE
Address: 400 SW 69 AVE.
City-St-Zip: MIAMI, FL 33144

Title: D () Delete
Name: PEREA, YVETTE
Address: 400 SW 69 AVE.
City-St-Zip: MIAMI, FL 33144

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change () Addition
Name: PEREA, YVETTE
Address: 26 WESTWARD DRIVE
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: D (X) Change () Addition
Name: PEREA, YVETTE
Address: 26 WESTWARD DRIVE
City-St-Zip: MIAMI SPRINGS, 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: YVETTE PEREA

D

05/04/2005

Electronic Signature of Signing Officer or Director

Date