

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000108248

Entity Name: MEDCONCEPTS INTERNATIONAL, INC.

FILED  
Jan 24, 2005  
Secretary of State

## Current Principal Place of Business:

300 S. ORANGE AVE.  
1500  
ORLANDO, FL 32801

## New Principal Place of Business:

20 N. ORANGE AVE.  
1400  
ORLANDO, FL 32801

## Current Mailing Address:

300 S. ORANGE AVE.  
1500  
ORLANDO, FL 32801

## New Mailing Address:

20 N. ORANGE AVE.  
1400  
ORLANDO, FL 32801

FEI Number: 20-2206866

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BIDHENDI, POURIA  
300 S. ORANGE AVE.  
SUITE 1500  
ORLANDO, FL 32801 US

## Name and Address of New Registered Agent:

MONAGHAN, MATTHEW  
20 N. ORANGE AVE.  
SUITE 1400  
ORLANDO, FL 32801 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: MATTHEW MONAGHAN

01/24/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: BIDHENDI, POURIA  
Address: 300 S. ORANGE AVE., SUITE 1500  
City-St-Zip: ORLANDO, FL 32801

Title: VP ( ) Delete  
Name: JAIMAN, JODI  
Address: 300 S. ORANGE AVE., SUITE 1500  
City-St-Zip: ORLANDO, FL 32801

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: BIDHENDI, POURIA  
Address: 20 N. ORANGE AVE., SUITE 1400  
City-St-Zip: ORLANDO, FL 32801

Title: VP (X) Change ( ) Addition  
Name: JAIMAN, JODI  
Address: 20 N. ORANGE AVE., SUITE 1400  
City-St-Zip: ORLANDO, FL 32801

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: JODI JAIMAN

VP

01/24/2005

Electronic Signature of Signing Officer or Director

Date