

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000126229

FILED
Feb 15, 2005
Secretary of State

Entity Name: NEW IMAGE MEDICAL GROUP, CORP.

Current Principal Place of Business:

7947 NORTHWEST 2 STREET
MIAMI, FL 33126 US

New Principal Place of Business:

7913 NW 2 ST
MIAMI, FL 33126 US

Current Mailing Address:

7947 NORTHWEST 2 STREET
MIAMI, FL 33126 US

New Mailing Address:

7913 NW 2 ST
MIAMI, FL 33126 US

FEI Number: 92-1592064

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODRIGUEZ, MICHELLE
7947 NORTHWEST 2 STREET
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

RODRIGUEZ, MICHELLE
7913 NW 2 ST
MIAMI, FL 33126 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:

02/15/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P, S () Delete
Name: RODRIGUEZ, MICHELLE
Address: 7947 NW 2 ST
City-St-Zip: MIAMI, FL 33126 US

Title: VP, () Delete
Name: STUBBS, JANET
Address: 7947 NW 2 ST
City-St-Zip: MIAMI, FL 33126 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RODRIGUEZ, MICHELLE
Address: 7913 NW 2 ST
City-St-Zip: MIAMI, FL 33126 US

Title: VP, (X) Change () Addition
Name: RODRIGUEZ, MARIADEL CARMEN
Address: 7913 NW 2 ST
City-St-Zip: MIAMI, FL 33126 US

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: MICHELLE RODRIGUEZ

P

02/15/2005

Electronic Signature of Signing Officer or Director

Date