2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000136160

Entity Name: EMEDICAL ID GROUP, INC.

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
202 LAKE MIRIAM DR				36CC STREET		
W3 LAKELANI	D, FL 33813		LAKELANL	D, FL 33815		
Current Mailing Address:			New Mailir	New Mailing Address:		
PO BOX 2 LAKELANI	476 D, FL 33806					
FEI Number: 06-1743578 FEI Number Applied For ()			FEI Number Not Applicable () Certificate of Status Desired ()			
Name and	l Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:		
	RICHARD C J	R				
36 CC ST LAKELANI	D, FL 33815	US				
	e named entity s e of Florida.	submits this statement for the purpo	ose of changing it	ts registered office or registered agent, or both,		
SIGNATUI	RE:					
	Electron	ic Signature of Registered Agent		Date		
Election Car	mpaign Financing	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	PCEO () MURPHY, RICH 1501 ARIANA R LAKELAND, FL	D 36 CC ST	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D () PITT JR, AMAS. 6 WINDING RO VALDOSTA, GA	AD	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	D () MOCK, WILLIAI 121 N 20TH ST OPELIKA, AL 3		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	DS () Change (X) Addition LIPPERT, WINSTON 10930 S.W. 7TH STREET, SUITE 206 MIAMI, FL 33174		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: RICHARD C. MURPHY, JR. PCEO 04/29/2009