2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000000917

FILED Jan 05, 2009 Secretary of State

Entity Name: TOTAL EMEDICAL, INC **Current Principal Place of Business: New Principal Place of Business:** 125 NW 13TH ST, STE B-1 BOCA RATON, FL 33432 **Current Mailing Address: New Mailing Address:** 125 NW 13TH ST, STE B-1 BOCA RATON, FL 33432 FEI Number: 20-2071037 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RUDNICK, HOWARD J M.D. 125 NW 13TH ST, STE B-1 US BOCA RATON, FL 33432 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: CFO (X) Change () Addition RUDNICK, HOWARD J RUDNICK, HOWARD J Name: Name: 1100 POINT PL #805 1100 POINT PL #805 Address: Address:

City-St-Zip: AVENTURA, FL 33180 City-St-Zip: AVENTURA, FL 33180

Title: () Delete Title: () Change () Addition

Name: FRESHMAN, GERALD Name: 6327 SAN MICHEL WAY Address: Address: DELRAY BEACH, FL 33484 City-St-Zip: City-St-Zip:

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: GERALD S. FRESHMAN MR. 01/05/2009