

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000023894

Entity Name: COMP-MED SOLUTIONS, INC.

FILED
Apr 28, 2006
Secretary of State

Current Principal Place of Business:

1 SW 129 AVE
SUITE 302
PEMBROKE PINES, FL 33027

New Principal Place of Business:

Current Mailing Address:

1 SW 129 AVE
SUITE 302
PEMBROKE PINES, FL 33027

New Mailing Address:

FEI Number: 20-2515901

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEFFNER, ADAM G
1900 NW CORPORATE BLVD.
SUITE 301-W
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

RENNER, STUART E
4400 NW 30TH ST
APT. 222
COCONUT CREEK, FL 33066 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: STUART E. RENNER

04/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JIMMERSON, MATHEW
Address: 1 SW 129 AVE, SUITE 302
City-St-Zip: PEMBROKE PINES, FL 33027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MATHEW JIMMERSON

P

04/28/2006

Electronic Signature of Signing Officer or Director

Date