

# **2007 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P05000023894

Entity Name: COMP-MED SOLUTIONS, INC.

**FILED**  
**Nov 18, 2007**  
**Secretary of State**

## **Current Principal Place of Business:**

1 SW 129 AVE  
SUITE 302  
PEMBROKE PINES, FL 33027

## **Current Mailing Address:**

1 SW 129 AVE  
SUITE 302  
PEMBROKE PINES, FL 33027

## **New Principal Place of Business:**

4450 NW 6TH ST  
SUITE 103  
DEERFIELD BEACH, FL 33442

## **New Mailing Address:**

4450 NW 6TH ST  
STE. 103  
DEERFIELD BEACH, FL 33442

FEI Number: 20-2515901

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## **Name and Address of Current Registered Agent:**

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

## **Name and Address of New Registered Agent:**

NEESON, ROBERT J JR  
4450 NW 6TH ST  
STE. 103  
DEERFIELD BEACH, FL 33442 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: ROBERT J. NEESON, JR.

11/18/2007

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: P (X) Change ( ) Addition  
Name: NEESON, ROBERT J JR.  
Address: 4450 NW 6TH ST STE. 103  
City-St-Zip: DEERFIELD BEACH, FL 33442

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: ROBERT J. NEESON, JR.

P

11/18/2007

Electronic Signature of Signing Officer or Director

Date