

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000014456

FILED  
Jul 04, 2009  
Secretary of State

Entity Name: IMPERIUM ALLIED MEDICAL INC.

## Current Principal Place of Business:

527 A1A N  
PONTE VEDRA BCH, FL 32082

## New Principal Place of Business:

12086 FT. CAROLINE RD  
SUITE 402  
JACKSONVILLE, FL 32225

## Current Mailing Address:

527 A1A N  
PONTE VEDRA BCH, FL 32082

## New Mailing Address:

12086 FT. CAROLINE RD  
SUITE 402  
JACKSONVILLE, FL 32225

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

JOYNER, JAMES  
527 A1A N  
PONTE VEDRA BCH, FL 32082 US

## Name and Address of New Registered Agent:

JOYNER, JAMES  
12086 FT. CAROLINE RD  
SUITE 402  
JACKSONVILLE, FL 32225 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: JAMES JOYNER

07/04/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR. ( ) Change (X) Addition  
Name: JOYNER, JAMES A  
Address: 12086 FT. CAROLINE RD SUITE 402  
City-St-Zip: JACKSONVILLE, FL 32225

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: JAMES JOYNER

DR.

07/04/2009

Electronic Signature of Signing Officer or Director

Date