

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000029488

Entity Name: MEDKB HEALTH, INC.

**FILED**  
**Jan 15, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

1543 DOUGLAS AVE  
DUNEDIN, FL 34698

**New Principal Place of Business:**

**Current Mailing Address:**

1543 DOUGLAS AVE  
DUNEDIN, FL 34698

**New Mailing Address:**

FEI Number: 26-8790966

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

IANELLO, MARK  
1543 DOUGLAS AVE  
DUNEDIN, FL 34698 US

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

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:**

Title: DPVS  
Name: IANNELLO, MARK  
Address: 1543 DOUGLAS AVE  
City-St-Zip: DUNEDIN, FL 34698

Title: T  
Name: IANNELLO, MARK  
Address: 1543 DOUGLAS AVE  
City-St-Zip: DUNEDIN, FL 34698

I hereby 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 all other like empowered.

SIGNATURE: M IANELLO

PRES

01/15/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date