

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000037494

FILED
Jul 05, 2008
Secretary of State

Entity Name: SPORTS MEDICINE INNOVATIONS, INC.

Current Principal Place of Business:

27328 BRIARGLADE LOOP
SUITE A
WESLEY CHAPEL, FL 33543

Current Mailing Address:

27328 BRIARGLADE LOOP
SUITE A
WESLEY CHAPEL, FL 33543

New Principal Place of Business:

27328 BRIARGLADE LOOP
SUITE A
WESLEY CHAPEL, FL 33544

New Mailing Address:

27328 BRIARGLADE LOOP
SUITE A
WESLEY CHAPEL, FL 33544

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KONIN, JEFF G
27328 BRIARGLADE LOOP
WESLEY CHAPEL, FL 33544 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

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: PTD () Delete
Name: KONIN, JEFF G
Address: 27328 BRIARGLADE LOOP
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: VSD () Delete
Name: KONIN, GINA L
Address: 27328 BRIARGLADE LOOP
City-St-Zip: WESLEY CHAPEL, FL 33543

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: KONIN, JEFF G
Address: 27328 BRIARGLADE LOOP
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: VSD (X) Change () Addition
Name: KONIN, GINA L
Address: 27328 BRIARGLADE LOOP
City-St-Zip: WESLEY CHAPEL, FL 33544

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: JEFF G. KONIN

PTD

07/05/2008

Electronic Signature of Signing Officer or Director

Date