

PO7000116342

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

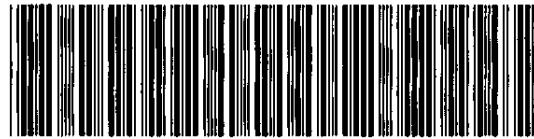
(Business Entity Name)

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Malave, Erin

From: SMARTMED GROUP INC [smartmedgroup@gmail.com]
Sent: Tuesday, July 20, 2010 12:41 PM
To: CorpAddressChange
Subject: Address Change Smartmed Group Inc

Dear Florida Department of State, Division of Corporations,

We need to change our Principal and Mailing address to:

**11430 NW 82 Ter.
Miami, FL 33178**

SMARTMED GROUP INC.
Document Number: P07000116342
FEI/EIN Number: 223970651

Best regards,

--

Ana Maria Reveron P.
SMARTMED GROUP, INC.
Servicio Inteligente
Cell: (305) 301-6750
Fax: (305) 883-0711