2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000133962

Entity Name: MEDBID USA, INC.

FILED Apr 02, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
--------------------------------------	----------------------------------

2665 SOUTH BAYSHORE DRIVE, SUITE 703 MIAMI, FL 33133

Current Mailing Address: New Mailing Address:

2665 SOUTH BAYSHORE DRIVE, SUITE 703 MIAMI, FL $\,$ 33133

FEI Number: 26-2209467 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WORLD CORPORATE SERVICES, INC. 2665 SOUTH BAYSHORE DRIVE, SUITE 703 MIAMI, FL 33133 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name: KAPOOR, ARUN Name: CHHABRA, SUSHMA
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 703 Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 703

City-St-Zip: MIAMI, FL 33133 City-St-Zip: MIAMI, FL 33133

Name: KULPA, ARMAND Name: KULPA, ARMAN

Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 703
City-St-Zip: MIAMI, FL 33133
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 703
City-St-Zip: MIAMI, FL 33133

Only of 21p. 1911 (1911) (1911)

Title: D () Delete Title: T/S (X) Change () Addition Name: CHOPRA, AJAY Name: KAPOOR, ARUN

Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 703 Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 703

City-St-Zip: MIAMI, FL 33133 City-St-Zip: MIAMI, FL 33133

Title: D (X) Delete Title: () Change () Addition

 Name:
 SANGAL, MANISH
 Name:

 Address:
 2665 SOUTH BAYSHORE DRIVE, SUITE 703
 Address:

 City-St-Zip:
 MIAMI, FL 33133
 City-St-Zip:

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: SUSHMA CHHABRA P 04/02/2008