


2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 27, 2004 8:00 am
Secretary of State

04-27-2004 90088 015 ***158.75

DOCUMENT # P94000047419	
1. Entity Name MEDI SOUTH, INC.	

Principal Place of Business 435 L'AMBIANCE DR PHM LONGBOAT KEY FL 34228 US	Mailing Address P.O. BOX 10508 LONGBOAT KEY FL 34228-7508 US
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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6. Name and Address of Current Registered Agent

MARTELL, EDWARD A. 435 L'AMBIANCE DR LONGBOAT KEY FL 34228-7508
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4. FEI Number 65-0503468	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
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7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE	(NOTE: Registered Agent signature required when reinstating)	DATE
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FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State	CORP. DISSOLVED NO FEE DUE	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: <i>Edward A Martell, Jr</i>	Date: 3-22-04	Daytime Phone #: 941-387-9403
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4-23-04 new cell **941-914-0208 cell**
941-284-8406



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

March 26, 2004

MEDI SOUTH, INC.
P.O. BOX 10508
LONGBOAT KEY, FL 34228-7508 US

Subject: **MEDI SOUTH, INC.**

Reference Number: **P94000047419**

Please be advised, we have received your annual report/uniform business report; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The fee to file the enclosed profit annual report/uniform business report is \$150.00. If a certificate of status is desired, please add an additional \$8.75.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/RJ

ANNUAL REPORTS SECTION

Enclosed please find a Check #1037 for \$158.75 for the filing
& status fee. Please return a status ^{Certificate} showing that Corporation
no longer exists and has no assets. I have checked the status box
and the box deleting me as an officer and director of this dissolved Corporation.
The Sarasota Taping Authority has been notified and a final tax return
was filed.

Sincerely,
Edward A. Martell, former President
Cell 941-284-8406

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314