

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000026297

FILED  
Mar 11, 2004  
Secretary of State

Entity Name: ULTIMATE MED SERVICES CORP.

## Current Principal Place of Business:

13018 S.W. 133RD COURT  
MIAMI, FL 33186

## New Principal Place of Business:

13014A S.W. 120 ST.  
MIAMI, FL 33186

## Current Mailing Address:

13018 S.W. 133RD COURT  
MIAMI, FL 33186

## New Mailing Address:

13014A S.W. 120 ST.  
MIAMI, FL 33186

FEI Number: 65-0569388

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BORCHES, MANUELA  
13018 S.W. 133 COURT  
MIAMI, FL 33186 US

## Name and Address of New Registered Agent:

BORCHES, MANUELA  
13014A S.W. 120 ST.  
MIAMI, FL 33186 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: MANUELA BORCHES

03/11/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BORCHES, MANUELA  
Address: 13018 S.W. 133RD COURT  
City-St-Zip: MIAMI, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: BORCHES, MANUELA  
Address: 13014A S.W. 120 ST.  
City-St-Zip: MIAMI, FL 33186

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MANUELA BORCHES

PD

03/11/2004

Electronic Signature of Signing Officer or Director

Date