2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000047312

FILED Jan 06, 2004 Secretary of State

Entity Name: PROFESSIONAL REIMBURSEMENT MANAGERS, INC.

urrent Principal Place of Business:		New Principal Place	New Principal Place of Business:			
7100 PINES BLVE SUITE 15 PEMBROKE PINE		US				
Current Mailing	,		New Mailing Addres	s:		
7100 PINES BLVE SUITE 15 PEMBROKE PINE)	US				
FEI Number: 65-0588	339 FEI Nu	mber Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()		
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:		
MENENDEZ, MEF						
in the State of Flor	S, FL 33024 l		purpose of changing its registere	ed office or registered agent, or both	3	
SUITE 15 PEMBROKE PINE The above named n the State of Flor SIGNATURE:	S, FL 33024 l entity submits ida.	this statement for the p			,	
SUITE 15 PEMBROKE PINE The above named in the State of Flor SIGNATURE: E	S, FL 33024 lentity submits ida.	this statement for the particles at the		d office or registered agent, or both	,	
SUITE 15 PEMBROKE PINE The above named in the State of Flor SIGNATURE: Election Campaign F	S, FL 33024 Lentity submits ida. Electronic Signalinancing Trust Fo	this statement for the p	ent	Date	-	
SUITE 15 PEMBROKE PINE The above named in the State of Flor SIGNATURE: E	S, FL 33024 Lentity submits ida. Electronic Signalinancing Trust Fo	this statement for the particles at the	ent		-	
SUITE 15 PEMBROKE PINE The above named in the State of Flor SIGNATURE: Election Campaign F OFFICERS AND Title: D Name: MENER Address: 7100 F	S, FL 33024 Lentity submits ida. Electronic Signalinancing Trust Fo	this statement for the particle of Registered Agund Contribution ().	ent	Date	-	

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: LANNY MENENDEZ D 01/06/2004