

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000044594

FILED
Jan 08, 2008
Secretary of State

Entity Name: MEDCARE INTERNATIONAL, INC.

Current Principal Place of Business:

12480 WEST ATLANTIC BLVD. SUITE 2
CORAL SPRINGS, FL 33071

New Principal Place of Business:

12480 WEST ATLANTIC BLVD.
SUITE 2
CORAL SPRINGS, FL 33071

Current Mailing Address:

12480 WEST ATLANTIC BLVD. SUITE 2
CORAL SPRINGS, FL 33071

New Mailing Address:

12480 WEST ATLANTIC BLVD.
SUITE 2
CORAL SPRINGS, FL 33071

FEI Number: 65-0669595

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHAPMAN, JOHN
12480 WEST ATLANTIC BLVD. SUITE 2
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

CHAPMAN, JOHN
12480 WEST ATLANTIC BLVD.
SUITE 2
CORAL SPRINGS, FL 33071 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:

01/08/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: ROHRER, KATHLEEN
Address: 15660 SW 12TH ST
City-St-Zip: PEMBROKE PINES, FL 33027

Title: VS () Delete
Name: CHAPMAN, JOHN
Address: 5286 GARDEN HILLS CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33415

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: KATHLEEN M ROHRER

PRES

01/08/2008

Electronic Signature of Signing Officer or Director

Date