2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000078257

Entity Name: MEDX CORPORATION

FILED Apr 27, 2004 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
1401 NE 77TH ST OCALA, FL 34479						
Current Mailing Address:				New Mailing Address:		
1401 NE 77TH ST OCALA, FL 34479			285 W CENTRAL PKWY SUITE 1726 ALTAMONTE SPRINGS, FL 32714			
FEI Number:	59-3405347	FEI Number Applied For ()	FEI Num	nber Not Appli	icable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and					Address of N	ew Registered Agent:
B&C CORPORATE SERVICES OF CENTRAL FLORIDA 390 NORTH ORNAGE AVE., STE #1100 ORLANDO, FL 32801 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:						
	Electro	nic Signature of Registered Agent	: :			Date
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS						
Title: Name: Address: City-St-Zip:	PCS (DETTMERS, M 1404 NE 77TH OCALA, FL 34	IST.		Title: Name: Address: City-St-Zip:	()	Change () Addition
Title: Name: Address: City-St-Zip:	D (FLANAGAN, JA 1404 NE 77TH OCALA, FL 34	IST.		Title: Name: Address: City-St-Zip:	D (X) BERKLEY, JAMI 1404 NE 77TH S OCALA, FL 344	ST.
Title: Name: Address: City-St-Zip:	D (GOH, ECK ME 1401 NE 77 S OCALA, FL 34	Т		Title: Name: Address: City-St-Zip:	()	Change () Addition
Title: Name: Address: City-St-Zip:	D (GOH, LEK OO 1401 NE 77 S OCALA, FL 34	Т		Title: Name: Address: City-St-Zip:	()	Change () Addition
Title: Name: Address: City-St-Zip:	D (LUM, DAVID 1401 NE 77 S OCALA, FL 34			Title: Name: Address: City-St-Zip:	()	Change () Addition
Title: Name: Address: City-St-Zip:	() Delete		Title: Name: Address: City-St-Zip:	FLEMING, DAVII 285 W CENTRA	Change (X) Addition D L PKWY SUITE 1726 PRINGS, FL 32714

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: DAVID FLEMING CON 04/27/2004