2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000078257

Entity Name: MEDX CORPORATION

FILED Jul 05, 2005 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:** 285 W CENTRAL PKWY **SUITE 1726** ALTAMONTE SPRINGS, FL 32714 FEI Number: 59-3405347 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: **B&C CORPORATE SERVICES OF CENTRAL FLORIDA** 390 NORTH ORNAGE AVE., STE #1100 ORLANDO, FL 32801 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: Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PCS () Delete () Change () Addition DETTMERS, MICHAEL V Name: Name: 1404 NE 77TH ST. Address: Address: City-St-Zip: OCALA, FL 34479 City-St-Zip: Title: Title: (X) Delete () Change () Addition BERKLEY, JAMES Name: Name: 1404 NE 77TH ST. Address: Address: OCALA, FL 34479 City-St-Zip: City-St-Zip: Title: Title: (X) Delete () Change () Addition GOH, ECK MENG Name: Name: 1401 NF 77 ST Address: Address: City-St-Zip: OCALA, FL 34479 City-St-Zip: Title: (X) Delete Title: () Change () Addition GOH, LEK OON Name: Name: Address: 1401 NE 77 ST Address: City-St-Zip: OCALA, FL 34479 City-St-Zip: Title: (X) Delete Title: () Change () Addition LUM, DAVID Name: Name: 1401 NE 77 ST Address: Address: City-St-Zip: OCALA, FL 34479 City-St-Zip: Title: CON () Delete Title: () Change () Addition FLEMING, DAVID Name: Name: 285 W CENTRAL PKWY SUITE 1726 Address: Address: City-St-Zip: City-St-Zip: ALTAMONTE SPRINGS, 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.

Electronic Oissantone of Oissain and	D: 1	D-4-
SIGNATURE: DAVID FLEMING	CFO	07/05/2005