SEP-18-1998 16:05

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Sep 30 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000063186

1. Corporation Name
INTERNATIONAL CONGRESS OF COMPLEMENTARY MEDICINE, INC.

Principal Place of Business	Mailing Address
1304 S.W. 160 AVENUE SUITE 651 SUNRISE FL 33326	1304 S.W. 160 AVENUE SUITE 651 SUNRISE FL 33326

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: JULY 22, 1997

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.: 22 SUITE 651	Suite, Apt. #, etc.: 27 SUITE 651
City & State: 23	City & State: 28
Zip: 24 Country: 25	Zip: 29 Country: 30

4. FEI Number: 65-0767363 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name: CONSUELO RUDAS
82 Street Address (P.O. Box Number is Not Acceptable): 1304 S.W. 160 AVENUE
83 SUITE 651
84 City: SUNRISE FL 85 Zip Code: 33326

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Consuelo Rudas, President — SEPTEMBER 18, 1998
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY - ST - ZIP	PRESIDENT CONSUELO RUDAS SAME AS ABOVE	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY - ST - ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY - ST - ZIP	VICE-PRESIDENT ROBERT J. RUDAS SAME AS ABOVE	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY - ST - ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY - ST - ZIP		☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY - ST - ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY - ST - ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY - ST - ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY - ST - ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY - ST - ZIP	800002554385 -10/02/98--01020--033 ***150.00	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY - ST - ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY - ST - ZIP		☐ Change ☐ Addition

CR2E034 (10/97)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Consuelo Rudas, President — SEPTEMBER 18, 1998
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

STF FL32381F.1

INTERNATIONAL CONGRESS OF COMPLEMENTARY MEDICINE

(2)

September 18, 1998

Department of State
Annual Reports Fillings
Division of Corporations
P. O. Box 1500
Tallahassee, FL 32302-1500

Dear Department of State:

Please accept our apologies for the lateness of this report. Apparently, when my corporate lawyer's secretary file this document she omitted the suite number in the address. We never receive this report.

Herewith, I include the check for $150.00 for the annual report.

Cordially,

Consuelo S. Rudas
President,

ICCM

1304 S.W. 160TH AVENUE,
SUITE 651
SUNRISE,FL 33326
PH: (954) 349-2502
FAX: (954) 349-9254