

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000097411

FILED
Feb 06, 2007
Secretary of State

Entity Name: MEDI-TRANSLATIONS INC.

Current Principal Place of Business:

1350 S POWERLINE ROAD
200
POMPAN0 BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

PO BOX 667140
POMPAN0 BEACH, FL 33066

New Mailing Address:

FEI Number: 65-0794053

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUS, CEM
6155 NW 65TH TERRACE
PARKLAND, FL 33067 US

Name and Address of New Registered Agent:

SAKAOGLU, ERHAN ESQ
2701 WEST OAKLAND PARK BLVD.
405
OAKLAND PARK, FL 33311 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: ERHAN SAKAOGU

02/06/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KUS, CEM
Address: 6155 NW 65TH TERRACE
City-St-Zip: PARKLAND, FL 33067

Title: VP () Delete
Name: KUS, JANET
Address: 6155 NW 65TH TERRACE
City-St-Zip: PARKLAND, FL 33067

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 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: CEM KUS

P

02/06/2007

Electronic Signature of Signing Officer or Director

Date