

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000020593

Entity Name: MEDIPON INC.

FILED
Feb 21, 2008
Secretary of State

Current Principal Place of Business:

15711 MAPLEDALE BLVD
STE B
TAMPA, FL 33624 US

New Principal Place of Business:

Current Mailing Address:

15711 MAPLEDALE BLVD
STE B
TAMPA, FL 33624 US

New Mailing Address:

FEI Number: 59-3555176

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PONCE, ROLANDO
14916 EVERSINE STREET
TAMPA, FL 33624 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: MEDINA, VIVIAN
Address: 13518 WESTSHIRE DRIVE
City-St-Zip: TAMPA, FL 33618

Title: VPVT () Delete
Name: PONCE, ROLANDO
Address: 15711 MAPLEDALE BLVD., SUITE B
City-St-Zip: TAMPA, FL 33624

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: VIVIAN MEDINA

DDS

02/21/2008

Electronic Signature of Signing Officer or Director

Date