

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000105504

**FILED**  
**Apr 28, 2012**  
**Secretary of State**

**Entity Name:** THE MED ED GROUP, INC.

**Current Principal Place of Business:**

475 SAVOIE DRIVE  
PALM BEACH GARDENS, FL 33410

**New Principal Place of Business:**

170 CELESTIAL WAY  
4-1  
JUNO BEACH, FL 33408

**Current Mailing Address:**

475 SAVOIE DRIVE  
PALM BEACH GARDENS, FL 33410

**New Mailing Address:**

170 CELESTIAL WAY  
4-1  
JUNO BEACH, FL 33408

**FEI Number:** 65-0903207

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MARTINEZ, CECILIA A  
475 SAVOIE DRIVE  
PALM BEACH GARDENS, FL 33410 US

**Name and Address of New Registered Agent:**

MARTINEZ, CECILIA A  
170 CELESTIAL WAY  
JUNO BEACH, FL 33408 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:

04/28/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MARTINEZ, CECILIA A  
Address: 170 CELESTIAL WAY  
City-St-Zip: JUNO BEACH, FL 33408

I hereby 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 all other like empowered.

SIGNATURE: CECY MARTINEZ

PRES

04/28/2012

Electronic Signature of Signing Officer or Director

Date