

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000029323

FILED
Feb 17, 2004
Secretary of State

Entity Name: INTERMED MANAGEMENT, INC.

Current Principal Place of Business:

3501 S UNIVERSITY DR, SUITE 6
FT LAUDERDALE, FL 33328

New Principal Place of Business:

Current Mailing Address:

C/O IVAN A. GOMEZ, P.A.
601 BRICKELL KEY DRIVE, SUITE 507
MIAMI, FL 33131

New Mailing Address:

FEI Number: 65-0917230 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

IAG CORPORATE SERVICES, INC.
601 BRICKELL KEY DR, SUITE 507
MIAMI, FL 33131 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: DP () Delete
Name: HOWARD, JAMES M
Address: 3501 S UNIVERSITY DR, SUITE 6
City-St-Zip: FT LAUDERDALE, FL 33328

Title: VP () Delete
Name: HOWARD, NANCY
Address: 3501 S UNIVERSITY DR STE 6
City-St-Zip: FORT LAUDERDALE, FL 33328

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 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.

SIGNATURE: NANCY C. HOWARD

SEC

02/17/2004

Electronic Signature of Signing Officer or Director

Date