2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 06, 2002 8:00 AM
Secretary of State

DOCUMENT# P99000059945

Entity Name: MED 411, INC.

Current Principal Place of Business:

5720 NW 62 MANOR
PARKLAND, FL 33067

New Principal Place of Business:

Current Mailing Address:

5720 NW 62 MANOR
PARKLAND, FL 33067

New Mailing Address:

FEI Number: 65-0932670 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ANDERSON, GARY
5720 NW 62 MANOR
PARKLAND, FL 33067

Name and Address of New Registered Agent:

ANDERSEN, GARY
5720 NW 62 MANOR
PARKLAND, FL 33067

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: GARY P. ANDERSEN 02/06/2002
Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: ANDERSEN, GARY
Address: 5720 NW 62ND MANOR
City-St-Zip: PARKLAND, FL 33067

Title: D ( ) Delete
Name: KALTMAN, LEE
Address: BOX 3157
City-St-Zip: MOUNT VERNON, NY 10553

Title: PD (X) Delete
Name: ANDERSEN, DON
Address: BOX 6860
City-St-Zip: SURFSIDE, FL 33154

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: ANDERSEN, GARY P
Address: 5720 NW 62ND MANOR
City-St-Zip: PARKLAND, FL 33067

Title: D (X) Change ( ) Addition
Name: ANDERSEN, DEBRA M
Address: 5720 NW 62ND MANOR
City-St-Zip: PARKLAND, FL 33067

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: GARY ANDERSEN PRES 02/06/2002
Electronic Signature of Signing Officer or Director Date