

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000062253

FILED
Apr 16, 2004
Secretary of State

Entity Name: MEDICINE MAN CENTER, INC.

Current Principal Place of Business:

14411 S. DIXIE HWY., STE. 209
MIAMI, FL 33176

New Principal Place of Business:

Current Mailing Address:

14411 S. DIXIE HWY., STE. 209
MIAMI, FL 33176

New Mailing Address:

FEI Number: 65-0936067

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAW OFFICES OF CRAIG M. DORNE, P.A.
407 LINCOLN RD., PH SE
MIAMI BEACH, FL 33139 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: P () Delete
Name: BEGLEY, RICHARD
Address: 14225 SW 103 AVE.
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,D (X) Change () Addition
Name: BEGLEY, KAREN
Address: 14225 SW 103 AVE.
City-St-Zip: MIAMI, FL 33176

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: KAREN BEGLEY

P,D

04/16/2004

Electronic Signature of Signing Officer or Director

Date