

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000075145

FILED  
Apr 12, 2004  
Secretary of State

Entity Name: SIGNATURE MEDICAL INTERNATIONAL, INC.

**Current Principal Place of Business:**

225 SADDLEWORTH PLACE  
LAKE MARY, FL 32746

**New Principal Place of Business:**

**Current Mailing Address:**

225 SADDLEWORTH PLACE  
LAKE MARY, FL 32746

**New Mailing Address:**

FEI Number: 59-3593778

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GATEV, IVAYLO B  
421 S. HYDER AVENUE  
APT C  
ORLANDO, FL 32801 US

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

GATEV, IVAYLO B  
3201 E CRYSTAL LAKE AVENUE  
ORLANDO, FL 32806 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/12/2004

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PDST ( ) Delete  
Name: GATEV, IVAYLO B  
Address: 421 S MYER AVE., APT C  
City-St-Zip: ORLANDO, FL 32801

Title: EVP ( ) Delete  
Name: SMITH, CHRISTOPHER  
Address: 225 SADDLEWORTH PLACE  
City-St-Zip: LAKE MARY, FL 32746

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PDST (X) Change ( ) Addition  
Name: GATEV, IVAYLO B  
Address: 3201 E CRYSTAL LAKE AVENUE  
City-St-Zip: ORLANDO, FL 32806

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: IVAYLO B GATEV

Electronic Signature of Signing Officer or Director

PSDT

04/12/2004

Date