

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V67646

FILED
Apr 27, 2007
Secretary of State

Entity Name: INTERMED BUSINESS CONSULTANTS INC.

Current Principal Place of Business:

2801 PONCE DE LEON BLVD.
1000
CORAL GABLES, FL 33134 US

Current Mailing Address:

2801 PONCE DE LEON BLVD.
1000
CORAL GABLES, FL 33134 US

New Principal Place of Business:

95 MERRICK WAY
250
CORAL GABLES, FL 33134 US

New Mailing Address:

95 MERRICK WAY
250
CORAL GABLES, FL 33134 US

FEI Number: 65-0405155

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIESCO, JOSE A
2801 PONCE DE LEON BLVD STE 1000
MIAMI, FL 33134 US

Name and Address of New Registered Agent:

RIESCO, JOSE A
95 MERRICK WAY STE 250
MIAMI, FL 33134 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:

04/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RIESCO, JOSE A
Address: 2801 PONCE DE LEON BLVD STE 1000
City-St-Zip: CORAL GABLES, FL 33134 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: RIESCO, JOSE A
Address: 95 MERRICK WAY STE 250
City-St-Zip: CORAL GABLES, FL 33134 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JOSE A RIESCO

PRES

04/27/2007

Electronic Signature of Signing Officer or Director

Date