

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000001844

FILED  
Jan 05, 2011  
Secretary of State

**Entity Name:** MEDSCOPE AMERICA CORPORATION

**Current Principal Place of Business:**

259 E LANCASTER AVE STE 101  
WYNNEWOOD, PA 19096

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 194  
WYNNEWOOD, PA 19096

**New Mailing Address:**

FEI Number: 23-2991908

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NATIONAL REGISTERED AGENTS, INC.  
2731 EXECUTIVE PARK DRIVE STE 4  
WESTON, FL 33331 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SMITH, RAYMOND W  
Address: 259 E LANCASTER AVE STE 101  
City-St-Zip: WYNNEWOOD, PA 19096

Title: V  
Name: SMITH, GREGORY  
Address: 259 E LANCASTER AVE STE 101  
City-St-Zip: WYNNEWOOD, PA 19096

I hereby 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 all other like empowered.

SIGNATURE: RAYMOND W. SMITH

P

01/05/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date